

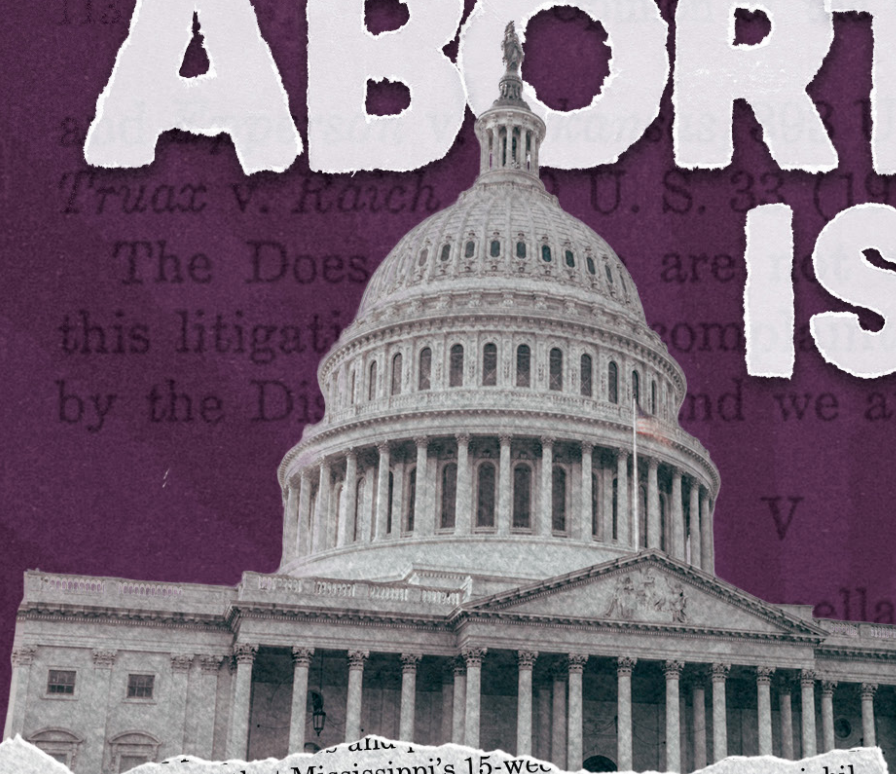
The Daily Tar Heel

WEDNESDAY, OCTOBER 12, 2022

129 YEARS OF SERVING UNC STUDENTS AND THE UNIVERSITY

VOLUME 130, ISSUE 25

THE ABORTION ISSUE



“Reasoning that Mississippi’s 15-week ban is unconstitutional, the Supreme Court’s cases forbidding States to ban abortion pre-viability were affirmed. Before this Court, petitioners defended the Act on the grounds that *Roe* and *Casey* were wrongly decided and the Act is constitutional because it satisfies rational-basis review. **Lead: The Constitution does not confer a right to abortion; *Roe* and *Casey* are overruled; and the authority to regulate abortion is returned to the people and their elected representatives. Pp. 8–79.** (a) The critical question is whether the Constitution, properly understood, confers a right to obtain an abortion. *Casey*’s controlling precedent on that question and reaffirmed *Roe* solely on the basis of its reasoning that Mississippi’s 15-week ban is unconstitutional.”



DEFUND PLANNED PARENTHOOD
TexasRallyforLife.org

KEEP ABORTION LEGAL

IF IT'S NOT YOUR BODY IT'S NOT YOUR CHOICE

APPEAL FROM THE UNITED STATES DISTRICT COURT OF THE NORTHERN DISTRICT OF TEXAS
No. 70-18. Argued December 13, 1971—Reargued October 11, 1972—Decided January 22, 1973
A pregnant single woman (Roe) brought a class action challenging the constitutionality of the Texas criminal abortion laws, which proscribe procuring or attempting an abortion except on medical advice for the purpose of saving the mother’s life. A licensed physician (Hallford), who had two state abortion prosecutions pending against him, was permitted to intervene. A childless married couple (the Does), the wife not being pregnant, separately attacked the laws, basing alleged injury on the future possibilities of contraceptive failure, pregnancy, unpreparedness for parenthood, and impairment of the wife’s health. A three-judge District Court, which consolidated the actions, held that Roe and Hallford, and members of their classes, had standing to sue and presented justiciable controversies. Ruling that declaratory, though not injunctive, relief was warranted, the court declared the abortion statutes void as vague and overbroadly infringing these plaintiffs’ Ninth and Fourteenth Amendment rights. The court held that the case was not justiciable. Appellants’ injunctive rulings, and appellee’s request for declaratory relief and the argument that the case presented a justiciable controversy, were rejected. The court’s grant of declaratory relief was affirmed. The court’s ruling that the case was not justiciable was affirmed. The court’s ruling that the case was not justiciable was affirmed. The court’s ruling that the case was not justiciable was affirmed.



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Established 1893
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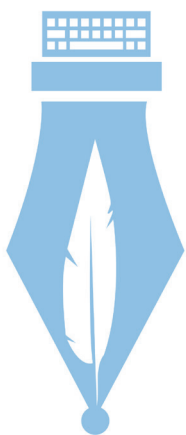
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The Daily Tar Heel

Dedicating an issue to reproductive health

Abortion is one of the biggest issues being discussed ahead of this year's midterm election. How the procedure is performed and regulated is of consequence to countless people across the country.

The spotlight on the issue has been heightened by the Supreme Court's June decision in *Dobbs v. Jackson Women's Health Center*, which overturned *Roe v. Wade*.

That's why we've dedicated this week's paper solely to covering abortion — how it works, how it's legislated, the history behind it and what comes next.

Our hope is that we can provide not only resources for those seeking to make decisions surrounding their health, but also a platform for those wishing to make their voice heard during this pivotal time period for us all.

Guillermo Molero
Editor-in-Chief

How a college newspaper can cover abortion

A few weeks ago, The Daily Tar Heel editing team sat around the table that's home to our University and City & State Desks. The meeting was guided by a question:

Should a college newspaper cover abortion?

On scrap pieces of printer paper, we wrote down potential story pitches: contraceptive access on campus, the costs of abortion procedures and North Carolina's position as one of the few Southern states where abortion is still legal.

So, how can a college newspaper cover abortion?

With the resources we have as a newsroom, we spoke with doctors, lawyers, activists, community leaders and UNC students. We thought critically about how we should report on the topic. We considered how the recent Supreme Court rulings have affected college-age students and N.C. residents, and what information would best serve our readership.

Our goal is to highlight the significant medical, financial, legal and political implications of birth control and abortion access in the state.

We chose for this special edition of The DTH to be entirely reported on and produced by female and nonbinary editors and staffers. On topics that most impact us, we feel that telling these stories is our responsibility.

We are journalists, but we're also people — people who have to make our own reproductive decisions.

For many, the stories in this newspaper feel personal. They mirror our experiences, capture our fears and answer our questions. We would be remiss not to address how impactful reporting on these topics has been — not only for the people

around us, but also for our own lives and our own bodies.

Reproductive health is a series of incredibly private decisions. But reproductive freedoms have become central to national conversations.

In this special edition, we report on how reproductive health care impacts everyday lives. We cover the way that Supreme Court decisions have shifted the upcoming midterm elections, and highlight community responses. We identify barriers that underrepresented and low-income communities face in health care access. We feature campus, local and national resources for people seeking contraception and abortion. And we give a platform to those who have chosen to share their honest and vulnerable experiences with us.

In editor's meetings, we talked about the language we should use in every story. We've elected to say "people seeking abortions," and "people who can become pregnant" in our coverage — because abortion is not something that is exclusive to cisgender women.

Regardless of individual beliefs or choices — abortion access impacts millions of people in the United States and thousands of people on UNC's campus.

Abortion is an issue that sits in doctor's office waiting rooms. It is an issue discussed in romantic relationships and written on ballots.

Sixteen reported articles.

Nine opinion pieces.

With uncertainty about the future, we look at reproductive health care today.

The Daily Tar Heel Abortion Issue.

Allie Kelly
Managing Editor

The Daily Tar Heel

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ELECTIONS

Republican supermajority may affect abortion access

They need just three more seats in N.C. House, two in Senate

By Maddie Singleton
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Although the North Carolina U.S. Senate race may be drawing the most attention, the 2022 midterm elections will also determine control of the North Carolina General Assembly and, potentially, the future of abortion access in North Carolina.

Republicans need just three more seats in the state House of Representatives and two more seats in the state Senate to obtain a veto-proof supermajority. If Republicans are able to secure this supermajority, they will be able to overturn Gov. Roy Cooper's veto without support from Democrats.

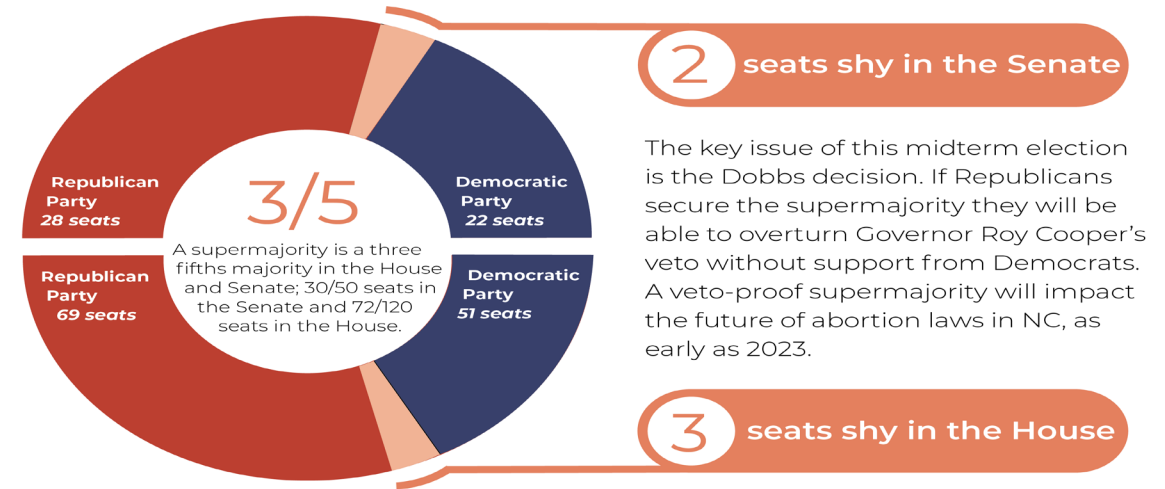
Andy Jackson, director of the Civitas Center for Public Integrity at conservative think tank John Locke Foundation, co-authored a September report on Republicans' chances of winning a supermajority in the N.C. General Assembly. In this report, he identified key races that may determine control of the N.C. General Assembly.

Jackson said key issues for the midterm elections will be the economy, inflation, and the Dobbs v. Jackson Women's Health Organization decision by the U.S. Supreme Court.

"You've got all these different issues that you're concerned about but you only have one vote for each office," he said. "So the question is, which of those are going to be the most salient for you as you go in and vote?"

For senior Megan Wagner, president of UNC Young Democrats, the most crucial issue affecting her vote is the Dobbs decision and abortion access.

2022 Midterm elections in North Carolina: Supermajority stakes in the North Carolina General Assembly



Wagner said she has heard Democrat leaders say this election is a referendum on the U.S. Supreme Court and said she sees this same energy in the students she registers to vote on campus.

"Everyone at one time is like, 'We have to do something because if they can do this, what else can they do?'" Wagner said.

North Carolina currently has a 20-week abortion ban, and Wagner said she is concerned that Republicans will be able to pass more restrictive abortion bans if they win the supermajority. She is also worried about the right to gay marriage, as well as increased Republican control in education.

Laura Macklem, press and political director of the Christian, pro-life organization NC Values Coalition, said that the economic consequences

of the Biden Administration policies will drive voters.

The Dobbs decision has pulled some moderate voters who might otherwise have used the election as a referendum on the party in power back towards Democrats, according to Jackson.

Abortion access post-midterms

Jillian Riley, director of public affairs for Planned Parenthood South Atlantic in North Carolina, said Republican leaders in the N.C. General Assembly have already indicated intent to introduce an abortion ban in January.

"So, if Republicans regain a supermajority this November, we can expect a ban or severe restrictions on abortion in early 2023," she said.

DTH/DATA VISUALIZATION BY GABI ALLEN

She said leaders have discussed different gestational bans, but Republicans ultimately seek to eliminate abortion access altogether.

Riley said voters need to protect Cooper's power to veto restrictions on abortion care and attacks on other fundamental freedoms including voting rights, LGBTQ+ equality and immigrant rights.

Jackson said he believes that over the next few election cycles, lawmakers will argue until they reach an uneasy compromise on abortion — a compromise pro-choice advocates will consider too restrictive and pro-life advocates will see as inadequate.

"Clearly, at least for a segment of base Republicans, getting abortion legislation passed in the near term

is a priority," Jackson said.

He said he expects to see a 15-week ban in North Carolina with exceptions for rape, incest, and endangerment to the life of the mother. Jackson also said Republican candidates in purple districts will be unlikely to go for more restrictive legislation because it could endanger them politically in 2024.

Macklem said that NC Values Coalition would like to see the strongest possible protections for unborn children and is hopeful for a heartbeat bill.

"It's important to get a supermajority because the left's position is so extreme," Macklem said.

UNC senior Amy Lawson, a member of Students for Life at UNC who identifies as an independent, said candidates need to do more than label themselves pro-life. Candidates need to address causes of abortion — like sexual exploitation, poor sexual education and inadequate Medicaid access — before further restricting it, she said.

"Abortion is a symptom of deeply-rooted issues that plague our country and in order to truly abolish abortion, we need policies that will address the root causes and provide alternatives," she said.

Jackson said Republicans also seek a supermajority to prevent for tax increases, more spending and "an expansion of government regulation" in people's lives.

Riley said abortion is healthcare and that the decision should stay between a pregnant person and their doctor, family and confidants.

"We think that any ban on a person's body — controlling a person's body — is going to be detrimental to their health and to their future," she said.

Twitter: @msingleton42

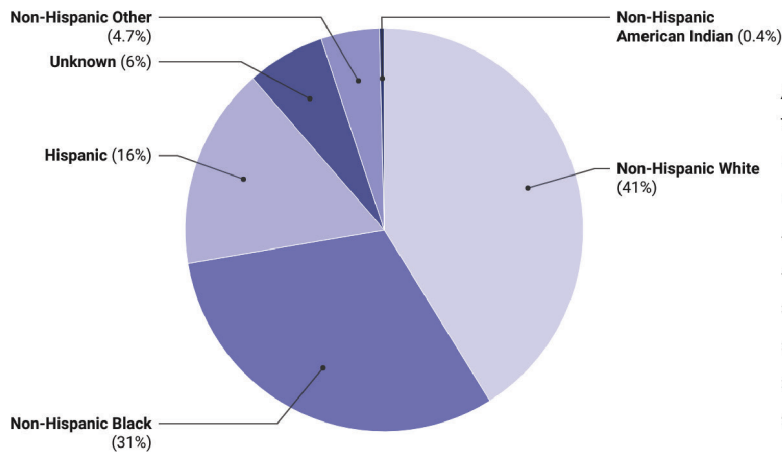


Who gets abortions in Orange County?

2020 abortions in Orange County: a demographic breakdown

Abortions performed on Orange County residents in 2020 by race and ethnicity

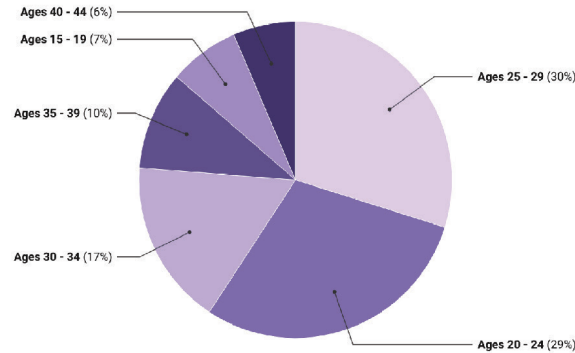
Non-Hispanic Black people received the most abortions in 2020, despite only making up 11.9 percent of the county.



Source: N.C. Department of Health and Human Services • Created with Datawrapper

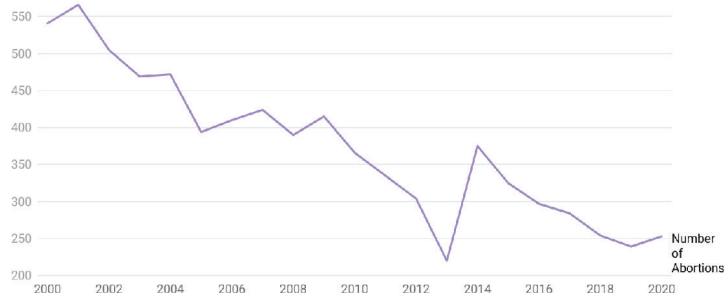
Abortions performed in Orange County in 2020 by age

The N.C. Department of Health and Human Services tracks all abortions performed in Orange County. People ages 25-29 received the most abortions in 2020.



Abortions performed on Orange County residents from 2000 to 2020

The total number of abortions performed on Orange County residents each year is generally decreasing.



The total number of abortions were underreported from 2011 to 2014, according to the N.C. Department of Health and Human Services.

DTH/DATA VISUALIZATION BY ASHLYN JOSHY

Abortion numbers were trending downward two years before Dobbs

By Ashlyn Joshy

Data Reporter
records@dailytarheel.com

In Orange County, there were 253 people who received abortions in 2020, according to the N.C. Department of Health and Human Services. Of those people, 31 percent were Black, despite Black

people making up only about 12 percent of the county.

Comparatively, non-Hispanic white people received 41 percent of the abortions performed that year, while white individuals make up about 70 percent of the county.

Women seek out abortions for a variety of reasons. According to a study conducted by the Guttmacher Institute, the most common reasons for having an abortion include — having a baby would dramatically change their

life, not being able to afford a baby and having relationship problems. Other reasons include the health of the mother, interfering with education and being unemployed.

The higher proportion of Black people receiving abortions in Orange County aligns with North Carolina's abortion demographics.

According to the NCDHHS, a total of 25,058 abortions were performed in North Carolina in 2020.

About 49 percent of all abortions performed in North

Carolina in 2020 were on Black individuals, and white people accounted for 28 percent of the total abortions.

However, according to the U.S. Census Bureau in 2020, white people made up about 62 percent of the N.C. population, while Black individuals made up about 20 percent of the state's population.

The number of abortions performed in Orange County has been trending downward.

Twitter: @dthcitystate

Know your rights in NC

Abortion after 20 weeks and six days has been outlawed in North Carolina. Nonetheless, abortion options in North Carolina are still available prior to this deadline.

North Carolina law requires pregnant people to receive counseling, and participate in a 72 hour waiting period before an abortion can be performed.

Both non-surgical and surgical abortions remain legal and accessible in North Carolina, and the procedures vary depending how far along a pregnancy is.

Non-surgical medical abortions are available for pregnant people within ten weeks from their last period. Only requiring a prescription of a series of pills, this type of abortion is the most common, least invasive and most accessible.

After 10 weeks, pregnant people may require a surgical abortion. A more invasive procedure, surgical abortions use anesthetic and surgical tools to remove the fetus from the uterus.

After 20 weeks and six days, abortion in North Carolina is illegal, except when necessary to preserve a pregnant person's general health, including mental health.

Know your rights, access to medical procedures is still available in North Carolina and remains accessible to pregnant people who need it.

- Samantha Lewis

We Would Like to Welcome you to UNC!

We, some of the faculty who are followers of Jesus Christ, are delighted that you're here with us in Chapel Hill. Each of us would be glad to talk about adjustments, managing academic life, finding friends and fellowship, our own faith, local churches, or anything else. Reach out by email, anytime. For a wealth of resources including info on several campus ministries, please visit the North Carolina Study Center in person at 211B W. Cameron Ave. (temporary location) or on the web at <https://www.ncstudycenter.org/>.

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LGBTQ+

Dobbs decision threatens trans, nonbinary individuals

Discussions on reproductive care often lack inclusive language

By Maddie Policastro
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After the U.S. Supreme Court overturned *Roe v. Wade* in June, thousands of protesters across the U.S. took to the streets, holding signs stating, “Women’s rights are human rights” and “Women’s rights matter.”

Although the statements highlight a large group affected by restrictions to abortion access, they exclude both the 1.6 million citizens older than 13 who identify as transgender and the 1.2 million citizens above 18 who identify as nonbinary and could also be impacted.

Trans people’s identities differ from the gender expression they were assigned at birth. While often grouped together with transgender individuals, nonbinary individuals’ identities do not fit into the traditional western male or female categories referred to as the gender binary.

In North Carolina alone, almost one percent of adults and 1.27 percent of youth identify as trans. With the recently reinstated 20-week abortion ban, some trans and nonbinary individuals in the state fear the repercussions of stricter restrictions.

Tohrran Hamilton, a transmasculine UNC student, said their initial reaction to the overturning of *Roe v. Wade* was one of panic.

Hamilton said a few of their trans friends have relied on access to safe and legal abortions. They said many people ignore the repercussions that abortion bans have on trans and nonbinary people who can get pregnant.

“If you’re thinking like a political kind of way, with those kinds of conversations, people kind of push



DTH/SOPHIE CAREY

UNC junior Izzie Steinke poses for a portrait in Chapel Hill, N.C. on Oct. 6, 2022.

like the LGBT side of things away because they’re not quote-unquote ‘as important,’” Hamilton said.

They said, however, that including trans and nonbinary people in discussions on abortion rights can be complicated.

Noah Lemmon, a trans student at UNC-Wilmington, said this issue stems from the lack of resources and education for trans and nonbinary individuals.

He said that many spaces that specialize in abortion access often offer services that cater to cisgender women.

“It’s so hard to access those spaces if you are not a woman and not perceived that way by people,” Lemmon said. “I think it definitely is ostracizing trans and nonbinary people a lot more.”

Lemmon said Planned Parenthood is one of the best resources for trans and nonbinary people looking for an inclusive environment.

Planned Parenthood offers resources for trans and nonbinary people, including a guide on gender identity to support those thinking about coming out. Lemmon said that Planned Parenthood is one of the major organizations

pushing inclusive language when discussing abortion rights.

“Transgender people have the same healthcare needs as cisgender people, such as basic physical exams, preventive care, and STD testing,” Planned Parenthood’s website said.

Izzie Steinke, a nonbinary UNC student, said the most immediate change to encourage inclusivity in the fight for abortion rights is language use.

“I think that a lot of the rhetoric that we’re hearing right now is talking about the struggles of restricted abortion access for women,” Steinke said. “By societal definitions, women are not the

only people who are going to struggle with this limited access.”

Steinke said that using exclusionary language can be hurtful and a lack of representation can be dangerous. Hamilton noted that restrictions on abortion could harm trans and nonbinary people’s mental health, as the stress caused by these restrictions adds to the stress that many trans and nonbinary people already experience.

A recent study published by the American Academy of Pediatrics found that 50.8 percent of female-to-male adolescents had attempted suicide at some point in their lives. Similarly, 29.9 percent of male-to-female adolescents and 41.8 percent of adolescents who identified as neither men nor women reported a previous suicide attempt.

Steinke said education is one of the keys to helping trans and nonbinary people feel more included and supported. Talking to trans and nonbinary individuals about their experiences, volunteering and writing to government officials along with voting are essential ways to influence change, they added.

Steinke also said that simply being there for trans and nonbinary friends may seem like a small action, but can make a big impact in their lives.

Lemmon said that putting aside differences and focusing on abortion restrictions is the only way to enact real change.

“This whole fight needs to be cognizant and aware of everyone who’s fighting it and everyone that it impacts, or it isn’t ever going to get anywhere,” Lemmon said.

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STATE LAW

Doctors, lawyers face ‘vague’ exceptions to abortion ban

Medical exceptions for N.C.’s 20-week cutoff prove difficult to interpret

By Emmy Martin
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North Carolina doctors and lawyers are attempting to develop guidelines on how to follow a reinstated 49-year-old law that bans abortions after 20 weeks of pregnancy except to save the life of a pregnant person.

It has proven difficult to define all the medical emergencies that could potentially result in a pregnant person’s death or serious injury – as well as the punishment for doctors if an abortion is not deemed part of this category.

According to state law, a medical emergency is defined as a complication to the medical condition of a pregnant person that leads to “the immediate abortion of her pregnancy to avert her death or for which a delay will create serious risk of substantial and irreversible physical impairment of a major bodily function.”

UNC Public Policy Professor Rebecca Kreitzer said statutes like North Carolina’s use language that might be interpreted in different ways.

“There’s so many different phrases in there that could be unpacked,” she said. “What does a physical impairment of a major bodily function mean? What constitutes a bodily function? How close do you have to be to death?”

Kreitzer also said some hospital legal teams might advise doctors

against providing abortions after 20 weeks under circumstances that could be interpreted as unfit under narrow definitions of a medical emergency.

“Even if a patient does fit the bill and fits under these narrow guidelines, it often means that the doctors have to go through a number of steps to really document how close the person is to being sick and how dangerous the situation is, which can add a dangerous amount of time before somebody can get the health care that they need,” she said.

Dr. Amy Bryant, an OB-GYN in Chapel Hill, said she’s had to turn away people seeking abortions beyond the 20th week of pregnancy due to the ban.

She said this included an individual carrying a fetus with a lethal anomaly that will result in the fetus’ death.

“Instead of us being able to prevent that pregnancy from continuing, we’ve had to send people to other states for that care,” Bryant said.

As some states around North Carolina entirely outlaw abortion and others restrict access, medical professionals must grapple with legal language that may not address all the medical situations of the patients who come into their clinics and hospitals.

“Everything is really up in the air right now, as there’s a lot in flux, even in North Carolina, but also all of our surrounding states as well,” Kreitzer said.

She also said the uncertainty created by the vague language of abortion bans can be intimidating for both providers and patients.



DTH/SAMANTHA LEWIS

DTH Photo Illustration. Vague abortion ban exceptions cause concern for doctors and lawyers throughout North Carolina.

Maxine Eichner, a UNC law professor, said medical situations often do not directly mirror the language of a legal statute.

“Even really well-meaning hospital administrators, physicians and other healthcare providers may be extra cautious and conservative and making decisions out of a fear of reprisal,” she said. “And the fear of reprisal is pretty substantial right now because there’s such a lack of certainty about it.”

North Carolina requires doctors who provide an abortion after the 16th week of pregnancy to send to the North Carolina Department of Health and Human Services the method used to determine the age of the fetus and “an ultrasound image of the unborn child that depicts the measurements,” as said in state law.

The state also requires that medical professionals who cause a

miscarriage or provide an abortion after 20 weeks of pregnancy “record the findings and analysis on which the qualified physician based the determination that there existed a medical emergency” to the NCDHHS.

Since doctors are facing possible legal consequences, some may be hesitant to provide abortions at all.

Kreitzer said part of the issue with the language used in abortion bans and medical exceptions is that they are written by policymakers who lack medical knowledge.

“Health experts are uniquely insightful into understanding the conditions under which somebody should be legally allowed and able to get an abortion,” she said. “And I think when policymakers tried to preemptively anticipate those things, it’s impossible for them to anticipate all situations.”

Bryant also said it is difficult for people without medical knowledge to fully understand situations where an abortion might be necessary.

“I think most lay people, of course, don’t have a real understanding of the health consequences, or the realities or the difficulties and challenges of some pregnancies,” she said.

As doctors and lawyers continue to make sense of a changing abortion landscape, Eichner questioned the intent of the vague nature of state laws.

“The reasonable conclusion here is legislators aren’t trying to pinpoint these issues as clearly or as well as they certainly could,” Eichner said. “Instead, some of this imprecision is deliberate – and it’s designed to chill abortion access.”

Twitter: @emmymartin

“What does a physical impairment of a major bodily function mean? What constitutes a bodily function? How close do you have to be to death?”

Rebecca Kreitzer
UNC Public Policy professor

ABORTION
NTC
LAW

HISTORY OF ABORTION LAWS IN NORTH CAROLINA

1881 Abortion is banned.

1967 Abortion is permitted in cases of rape, incest and fatal pregnancies.

1973 Access to abortion is declared protected by the constitution through the U.S. Supreme Court's decision in *Roe v. Wade*.

1992 Planned Parenthood v. Casey establishes that the government can create laws restricting abortion, but it can't do it in a way that places undue burden on the person who's pregnant.

2011 The "Woman's Right to Know Act" restricts access to abortion in North Carolina. These constraints include mandatory 24-hour waiting periods, compulsory counseling for abortion-seekers and obligatory ultrasounds prior to an abortion, during which abortion practitioners must describe the fetus to the abortion seeker.

2015 "Women and Children's Protection Act" tripled the waiting period for abortions from 24 to 72 hours, barred anyone under 18 from being employed at an abortion clinic, and forced doctors to send the ultrasounds of abortion seekers to the North Carolina Department of Health and Human Services.

2019 The state's 20-week abortion restriction is declared unlawful by the federal district court as a result of the *Bryant v. Woodall* case. Additionally, several anti-abortion bills were vetoed by Gov. Roy Cooper.

2022 In June, *Roe v. Wade* was overturned by the U.S. Supreme Court. Two months later, the 20-week ban on abortion was enforced in NC.

PRECEDENT

Reproductive health in the courts

A breakdown of cases about how reproductive health is regulated

By **Hannah Rosenberger**
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In June, the Supreme Court ruling on *Dobbs v. Jackson Women's Health Organization* overturned nearly 50 years of precedent protecting the right to an abortion under the United States Constitution.

North Carolina is one of the few states in the South where abortion remains legal — but there are still restrictions on access, and questions remain about what is and is not protected.

The Daily Tar Heel breaks down the most important court cases that continue to affect reproductive care.

Roe v. Wade

In 1973, the Supreme Court set the precedent that abortion was under federal jurisdiction and protected by the Constitution.

Joan Krause, a professor in the UNC School of Law, said under the trimester framework established under *Roe v. Wade*, states were very limited in how they could regulate or limit access to abortion during the first two trimesters.

After viability, states could limit or prohibit abortions, except as necessary "for the preservation of the life or health of the mother," according to the case decision.

But regardless of this nuance, the decision established that states could not outright ban abortions prior to viability, Krause said.

"The crucial judicial pronouncement in *Roe v. Wade* is that the federal Constitution speaks to the issue of abortion," Maxine Eichner, a professor in the UNC School of Law, said. "And what it says is that the right to choose an abortion is a fundamental right protected by the U.S. Constitution."

Planned Parenthood of Southeastern Pennsylvania v. Casey

This 1992 case affirmed that the Constitution protects the right to an abortion, but the U.S. Supreme Court essentially abandoned the trimester framework established by *Roe v. Wade*, Krause said.

The court confirmed that *Roe v. Wade* did not establish an "unqualified" right to an abortion. Instead, it protects the pregnant person from "unduly burdensome interference" while seeking an abortion.

Krause said that an "undue burden" is placing a substantial obstacle in the way of someone seeking abortion care.

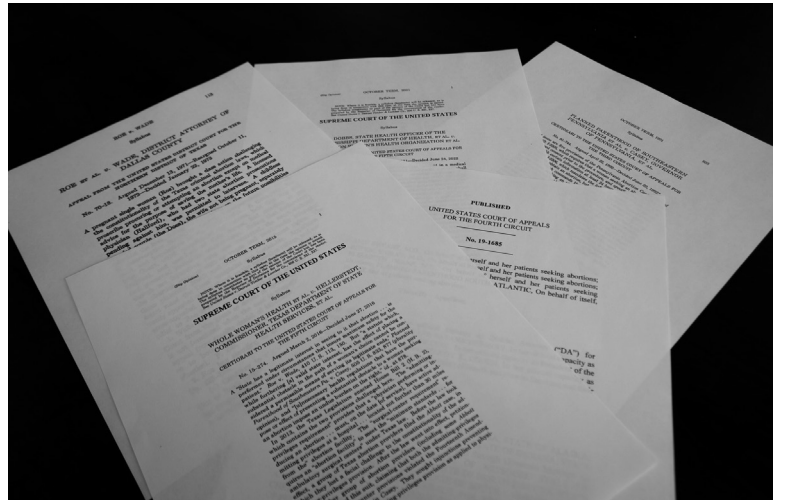
But what this means is not specifically laid out.

"The key then becomes 'What's an undue burden?'" Eichner said. "And the court didn't really explain that."

Dobbs v. Jackson Women's Health Organization

In June 2022, the Supreme Court ruled in *Dobbs v. Jackson* that the Constitution does not protect the right to an abortion.

Dobbs v. Jackson did not ban all abortions nationwide. But Krause said under the new ruling, federal courts can't regulate abortion access because it is no longer under the jurisdiction of the Constitution. Instead, it is left to state legislative bodies.



DTH PHOTO ILLUSTRATION/KENNEDY COX
Various court cases in addition to *Roe v. Wade* and *Dobbs v. Jackson Women's Health Organization* play a role in nationwide reproductive care.

But individual states can choose to establish almost any laws related to abortion and abortion access, as long as they are not completely irrational, Eichner said.

Bryant v. Woodall

In 2019, the U.S. District Court for the Middle District of North Carolina ruled in *Bryant v. Woodall* to place an injunction on a 1973 law banning abortions after 20 weeks of pregnancy.

But, after the *Dobbs* decision was announced, a North Carolina judge ruled in August that this injunction no longer had a foundation — as it was based on the implications of *Roe* and *Casey* — and the ban was reinstated.

Abortions after 20 weeks are not legal anymore in North Carolina, except in the case of medical emergencies where they are necessary to prevent the death of or irreversible harm to the mother.

Wider implications and privacy law

Under *Roe v. Wade* and *Planned Parenthood v. Casey*, the right to an abortion was protected under the "right to privacy." Many cases decided around the same time as *Roe* also upheld rights under this idea, Eichner said — for example, cases related to contraception and interracial marriage.

In the *Casey* decision, the majority established that court precedent does not support limiting citizen's protected rights to only those explicitly laid out in the Constitution.

Regardless, questions remain about whether the other rights previously thought to be settled under a "right to privacy" will still be protected.

"How many of those older cases that form the basis for everything are now threatened by *Dobbs*?" Krause said.

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LEGISLATION

A look at enforcing abortion laws in NC

Prosecutors vary in their approaches to legislation following *Roe's* reversal

By **Maddie Van Meter**
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On Aug. 17, U.S. District Court Judge William Osteen Jr. lifted an injunction that blocked North Carolina's ban on any abortions performed after the 20th week of pregnancy.

This ruling came after political debate regarding the 1973 state law in light of the U.S. Supreme Court's overturning of *Roe v. Wade*.

N.C. Senate President Pro Tempore Phil Berger (R-Caswell, Rockingham, Stokes, Surry) and N.C. House Speaker Tim Moore (R-Cleveland) wrote a letter to N.C. Attorney General Josh Stein on the day *Roe* was overturned, urging him to lift the injunction.

In response, Stein said efforts to restrict pregnant people's ability to make healthcare decisions cannot be allowed and that he would protect reproductive rights.

"Today there is an increasingly hostile environment toward women's freedoms," Stein said in a July 2 tweet.

Berger and Moore then submitted a brief on July 27 to the U.S. District Court for the Middle District of North Carolina, of which Osteen is the chief judge. The brief urged the Court to lift the injunction, saying its application was "not just or equitable."

Jeff Nieman, the incoming district attorney for District 18, which covers Orange and Chatham counties, also said he is in support of making reproductive healthcare decisions.

"We cannot stand for this assault on women and private reproductive healthcare decisions," Nieman said in a May 3 tweet.

Nieman said he has committed to join a pledge — along with over 60 other prosecutors across the country — to not prosecute people who receive abortions or healthcare professionals who assist in the procedure.

He added he does not see a need for anyone to be charged with a crime related to abortion care.

"As district attorney, I don't see any place for district attorneys to

get into litigating medical decisions that women make between them and their doctors," Nieman said.

According to the National Advocates for Pregnant Women, law enforcement officials can, in some cases, investigate pregnant people for noncriminal acts, such as seeking medical help or experiencing a stillbirth.

The organization also said prosecutors can decide whether or not to accept certain abortion cases.

Other NC abortion laws

North Carolina law requires abortion care to be provided by licensed physicians and abortion medication to be administered in person. Any providers who violate these restrictions may face criminal penalties.

The reinstatement of the 20-week abortion ban poses difficulties for people who are delayed in receiving treatment due to access to abortion care — resulting from lack of transportation or funding — or medical complications later in pregnancy, according to the American Civil Liberties Union.

North Carolina also has a state-mandated 72-hour waiting period for those seeking abortions.

According to the Center for Reproductive Rights, North Carolina has target regulation of abortion providers (TRAP) laws, which impose regulations on abortion clinics and reporting.

President of North Carolina's Chapter of the National Organization for Women Gailya Paliga said these TRAP laws include holding abortion clinics to the same standards as ambulatory surgery centers.

According to the ACLU, these standards can be costly and difficult to comply with.

TRAP laws are opposed by several medical groups, including the American College of Obstetricians and Gynecologists, the American

Medical Association and the American Academy of Family Physicians, according to court documents.

According to the Guttmacher Institute, TRAP laws endanger patients by reducing the number of abortion facilities that are able to stay open.

In 2017, 91 percent of North Carolina counties did not have any clinics providing abortions. 53 percent of women in North Carolina lived in these counties.

Paliga said there are many problems with abortion bans, including the language that is sometimes used in these laws.

"They're vilifying women that are needing abortions later for whatever reason," Paliga said.

Community response

Gerrie Richards, president of the Chapel Hill NOW, said access to reproductive health is endangered and that remaining informed is key.

She said when they first feared for the overturning of *Roe v. Wade*, Chapel Hill NOW created a set of resources including information about abortion, contraception, other reproductive health issues and sexually transmitted illnesses.

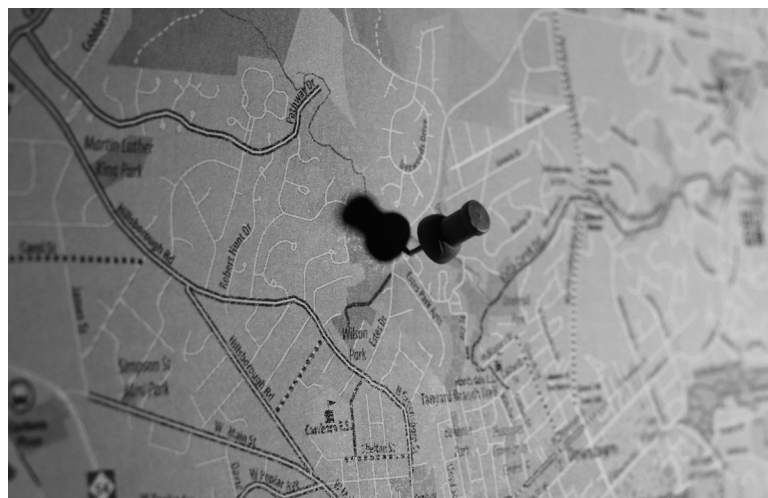
Richards said the resources help young people who can become pregnant on college campuses and don't know where to receive help.

She added that the importance of abortion care extends beyond North Carolina, impacting all people.

"It's the basic freedom to make choices — about your health, about your future, about your present," Richards said. "About the person that you are and the person that you want to be."

NOW is hosting a zoom conference on Oct. 21 and 22 about how to access abortion pills without facing legal trouble. Anyone can register and view resources on *NOW's* website.

Twitter: @madelynvanmeter



DTH PHOTO ILLUSTRATION/OLIVIA PAUL
DTH Photo Illustration. The enforcement of laws regarding abortion access can be dependent on the person who enforces the law.

EXPANDING ACCESS

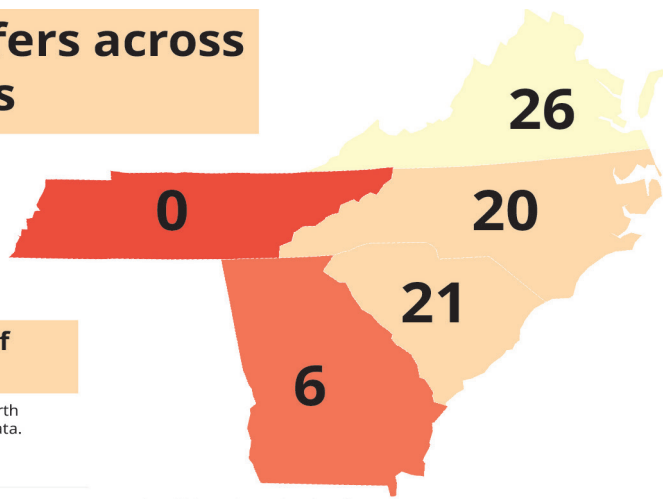
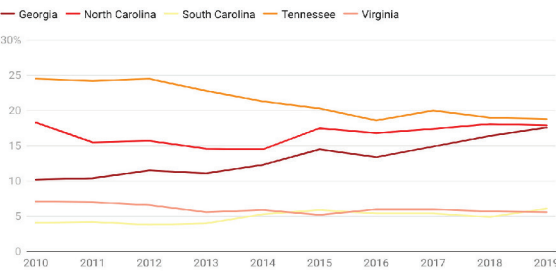
Abortion providers see out-of-state patients increase

Abortion access differs across Southeastern states

In North Carolina abortions are banned after 20 weeks of pregnancy.

A look at abortion trends for out-of-state residents from 2010 to 2019

In 2019, almost 18 percent of the abortions performed in North Carolina, were for out-of-state residents, according to CDC data.



Here's how North Carolina compares to its neighbors in abortion access

Right now North Carolina and South Carolina have some of the most liberal abortion laws compared to other southern states. Tennessee on the other hand, has an almost complete ban on abortion following triggers laws which went into effect after Roe v. Wade was overturned.

DTH/DATA VISUALIZATION BY SURABHI DAMLE AND HARI POTRARAJU

Abortion affordability

Just because abortion is still legal in N.C. does not mean it is necessarily accessible, Justine said.

"When we're talking about the impact of abortion bans, it really is falling hardest on people with low income," Rivera said. "It's falling hardest on people who lack access to healthcare in general, and we know that that is often communities of color, people of color, because of historic and systemic barriers to accessing just basic primary care, never mind reproductive health care."

CAF provides financial aid to people accessing abortions in North and South Carolina. The nonprofit directly pledges money to the patient's abortion clinic and helps connect them with additional funding for outside expenses if needed.

Since the Dobbs decision, Justine said that CAF has seen a sharp increase in calls requesting funding.

"On a typical week prior to Dobbs, we were getting around 50 calls a week, which is still a tremendous number, truly," she said. "But in the last couple of weeks, we've seen closer to 80 or 90 calls, and that is a huge jump, considering that we are also unable to fully fund every caller that gets in touch."

In N.C., the average abortion pill costs \$360. A surgical abortion can cost anywhere between \$340 and \$1,400 depending on the type of procedure.

People seeking abortions have to consider these costs alongside the cost of travel, lodging, childcare and missing work Gavin said.

"Now we're seeing the costs of accessing care exasperated, especially for folks who are traveling from out of state or even within North Carolina," she said.

According to Rivera, more than half of the recent patients at Planned Parenthood's Asheville Health Center have traveled from out of state.

Abortion legislation and education

People seeking an abortion in N.C. are required by law to get counseling from their abortion provider 72 hours before their abortion.

Additionally, people under the age of 18 need permission from a parent or guardian to get an abortion. They have the option of bringing it to a judge for a judicial bypass if it is not possible to get parental approval.

Getting access to an abortion can also be complicated by a lack of information and guidance through the legal processes.

NC Teens For Abortion Access fundraises for CAF and provides information about abortion access in N.C. through social media.

"We want to be able to educate others because we want to help people develop their own opinions on abortion access," Caroline Zhou, a senior at Chapel Hill High School and member of the organization, said. "That's why we're providing them with this information."

Because the members of NC Teens for Abortion Access are still minors, Zhou, along with fellow members Ruoyan Chen and Tanvi Gaur, said they want to do what they can to advocate for abortion access.

The upcoming Nov. 8 midterm elections will be important for abortion rights, Rivera said, so knowing who is running for office and their stance on abortion is important for voters who care about abortion access.

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N.C. becomes an access point for reproductive healthcare in the South

By Eliza Benbow
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As states further restrict abortion access, North Carolina has become a critical access point for reproductive care in the South.

Since the Dobbs v. Jackson Women's Health Organization decision in June, Planned Parenthood South Atlantic has seen the number of out-of-state patients accessing abortion care at their N.C. health centers more than triple.

Georgia has banned abortion after about six weeks of pregnancy, and Tennessee has banned abortion totally.

People travel from these and other neighboring states to seek abortion care in N.C., but patients have come from as far as Missouri, Louisiana and Texas, according to Amber Gavin, the vice president of advocacy and operations for A Woman's Choice, Inc.

"We know that abortion is healthcare. We know that abortion is going to be needed no matter what," Gavin said. "And we are here to provide that care and we are here to fight for that care as long as we possibly can."

In August, U.S. District Court Judge William Osteen Jr. reinstated N.C.'s 20-week abortion ban.

"It's a confusing and scary time for patients and providers," Molly Rivera, the communications director of Planned Parenthood South Atlantic, said. "Throughout the medical community, there's a lot of confusion and frustration about what medical providers can and cannot do in the realm of reproductive healthcare."

Carolina Abortion Fund director of engagement Justine, who requested The Daily Tar Heel only use her first name, said the Carolinas are the most Southeastern states providing care up to 21 weeks.

Even though Virginia bans abortion later — after 26 weeks of pregnancy — the Carolinas are more accessible for many southern states.

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VOLUNTEERING

Abortion clinic escorts continue post-Roe



DTH/ANNA CONNORS

An abortion clinic escort volunteer stands outside Planned Parenthood on Saturday, Oct. 1, 2022.

Their role is to help patients safely and discreetly enter clinics

By Lucy Marques
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Editor's note: The subject of this article is referred to by her first name due to safety concerns.

Shannon began volunteering as an

escort at one of the busiest abortion clinics in North Carolina over three years ago.

She still escorts abortion patients in Charlotte multiple times a week, ensuring that those who come to the clinic feel safe and supported.

A professor of women's and gender studies, Shannon started her volunteer work with the clinic after learning of the opportunity from her students. She said she started volunteering because she wanted to do more in the community and take a more active stance on the issues she teaches about.

Volunteer clinic escorts help patients get through the front door with as little harassment from protesters and picketers as possible, according to Planned Parenthood.

As an escort, Shannon begins her volunteer shift by setting up the sidewalk in front of the clinic with chairs, coolers, easels and signs. The signs help clarify for patients which parking lots they can use in the midst of protesters attempting to stop cars and confuse them, she said.

"Every volunteer has an escort or defender vest, and that is to make sure it is obvious who we are," she said. "The escorts have big rainbow umbrellas and those umbrellas are not for weather,

they're for shielding the patients from the view of the 'antis.'"

Volunteer escorts go up to the patients' cars to speak with them briefly and make sure they are ready to go inside the clinic, Shannon explained.

Clinic escorts stay in the parking lot and have the most direct interaction with patients, while clinic defenders interact with the protesters, Shannon said. She added that there are a lot of very active protesters at her clinic.

During the pandemic, because defenders and escorts stopped working for safety reasons, Shannon said anti-abortion protesters had greater access to the clinic.

"In fact, some (protestors) were even arrested because they still were absolutely antagonizing the patients and limiting their access, so when we were able to go back out, I immediately started back, and frankly, started out with a vengeance," she said.

Dani Hoffpauir, the patient advocacy program manager for Planned Parenthood South Atlantic, said clinic escorts create a welcoming environment for patients and help them access the health care they need without judgment.

Hoffpauir added it's important for patients to have a support system as

they are entering the clinic. She said having someone offer a smile or some conversation can really help patients feel safe.

Shannon said she prefers escorting to defending because she has been in the position of an abortion clinic patient before.

"The benefit of escorting — although it can be more emotional sometimes — is that you can see exactly why you're doing what you're doing," she said.

Over the past few months, Shannon said she's heard from out-of-state patients about how traumatic it has been to get a procedure at an abortion clinic due to states limiting, or completely banning, abortion access in the wake of the United States Supreme Court overturning Roe v. Wade.

Shannon said she has no doubt that the presence of clinic escorts is a huge relief to patients.

Clinic defender and co-president of UNC Campus Y Laura Saavedra Forero said she considers Shannon to be her "clinic mom." She praised Shannon's ability to form impactful relationships with patients in short periods of time and take care of other volunteers.

Apart from Shannon's work as a full-time professor, Saavedra Forero said she puts in countless hours at the clinic.

"Shannon is definitely the escort I would want if I was heading into the clinic," she said.

Saavedra Forero also emphasized the strength of the volunteer community at the clinic, and how they are often together during difficult times. There are days when the protesters target the volunteers and their identities, which can be difficult to deal with, she said.

Shannon said she has been screamed at by protesters while volunteering as an escort.

"I've had antis tell me where I live, they know my address," she said. "They've said things about my teaching, they talk about me being a teacher. They know things about us — they have files on us, essentially."

Saavedra Forero said Shannon will step in when she sees volunteers need more support — she lets them know they are loved and welcome, and that they should prioritize themselves too.

It's really rewarding to see volunteers who were unsure about their position as escorts become more confident in themselves, Shannon said.

"I absolutely can feel like I can step away and we've got this phenomenal group that can take over," she said.

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ADVOCACY

Pro-life groups offer abortion alternatives outside clinics

They direct those seeking abortions to resources like crisis pregnancy centers

By Elizabeth Egan

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JT Klimek has gone to the Planned Parenthood Chapel Hill Health Center almost every Saturday since the U.S. Supreme Court overturned Roe v. Wade on June 24.

Klimek is one of the handful of other pro-life individuals who were at the center on Saturday morning, although there have often been dozens of people there in the past — with some spending their Saturday mornings standing outside abortion clinics for years.

Klimek said his main goal when visiting Planned Parenthood is to talk with people seeking abortions and provide them with information and resources available in the area that could help them in their pregnancy.

He and other pro-life individuals point people seeking abortions to crisis

pregnancy centers such as Gateway Women's Care, which has locations in Chapel Hill, Raleigh and Durham. According to its website, Gateway provides pregnancy tests, ultrasounds, STI testing and "options counseling."

However, pro-choice organizations like Pro-Choice North Carolina state that these centers often use misleading advertisements and inaccurate information to attract patients.

Lydia Taylor, president of Campbell Students For Life at Campbell University, has also stood outside Planned Parenthood in Chapel Hill to speak with those seeking abortions.

"Both my organization and I go to abortion clinics to provide pregnancy resources to women seeking abortion and inform them of how abortion will only hurt them and their baby," she said.

Chelsea Smith, a graduate student at UNC, is president and a founder of Pro Life Future of the Triangle, which caters to young adults who want to be involved in pro-life activities.

She said when her organization speaks with people on the sidewalk of Planned Parenthood, they promote and



DTH/KENNEDY COX

JT, one of the protesters outside of Planned Parenthood in Chapel Hill on Saturday, Oct. 9, 2022, poses with his sign.

represent Standing With You, a national database that includes pregnancy resources alongside information about food banks and shelters.

"(Standing With You) is kind of just like a place to gather all of these resources in one place," Smith said. "So when we're on the sidewalk, we're representing them and we're trying to get the word out about all these different resources."

According to an email statement

from UNC Students for Life, the group has also stood outside the Chapel Hill Planned Parenthood.

Klimek said many people who face unplanned pregnancies do not have support systems in their lives and may not be aware of options besides abortion, which is why he wants to let them know of available support.

"Maybe they don't have someone they can talk to, maybe they don't have the best relationship with their intimate partner," he said. "Sometimes they face pressure to get rid of the baby and want to stay in that relationship. And they come to abortion clinics because they feel like there's no other place."

Klimek also said while people are not allowed to stand on the premises of Planned Parenthood, they will stand close to the road and try to flag down cars as they pull in. The goal is not, he said, to pressure those seeking Planned Parenthood's services to speak with members of his group if they are clearly not interested.

Taylor said that there is a common misconception that pro-life groups go to abortion clinics to condemn or

yell at those seeking services, but this is not her intention.

She added that she and her organization have received mixed responses to their presence at the clinic.

"Many people at the clinics are receptive and talk to us, and many women do end up choosing life and allowing us to help them," she said. "However, we also get harassed, threatened and bullied for what we do."

UNC Students for Life said the group has experienced hostility while outside Planned Parenthood, but it has also encountered people who are open to speaking with them.

"We have had conversations with several women, and while we do not know the outcome of the majority of these conversations, a couple of women have left the clinic without going inside for their appointment," the organization said in an email.

Klimek said that no matter the response from those seeking abortions, he is always glad for the opportunity to speak with people who are willing.

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PRO-LIFE

NC organizations seek anti-abortion legislation

The groups look to limit or end access to abortions across the state

By Walker Livingston

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In the first election after the overturning of Roe v. Wade in North Carolina, many pro-life and Christian groups are working to limit or end access to abortion across the state.

North Carolina Right To Life, a nonprofit organization led by Dr. William Pincus, is one of these groups that seeks anti-abortion legislation.

"Right To Life's two big goals are to elect pro-life officials and to protect the innocent and voiceless because if you think about it, who is the most defenseless thing in the world?" Pincus said. "An unborn baby."

While NCRTL is not an explicitly religious organization, Pincus said his personal religious identity as a devout Christian inspires him to advocate against abortion.

In order to prepare for the upcoming election season, NCRTL

has created a voter guide identifying pro-life candidates for political office in all voting districts in the state. The Political Action Committee associated with NCRTL contributes funds to these endorsed candidates.

Pincus, said he believes the overturning of Roe is the starting point for building upon anti-abortion legislation in North Carolina.

"In 1973, you had this judicial overreach, where the Supreme Court wrongfully decided that the right to abortion was included in the Constitution, which it is not there at all," Pincus said.

NCRTL PAC's political endorsements this election season include Ted Budd for U.S. Senate, and Courtney Geels for U.S. House in District 4.

Numerous other groups join NCRTL in supporting pro-life candidates this election season, such as the North Carolina Values Coalition, NC Family Policy Council, and NC Faith and Freedom Coalition.

The North Carolina Values Coalition is an explicitly Christian, non-partisan organization that advocates for pro-life,

pro-family and pro-religious liberty causes, according to their website.

Their mission statement explains that they believe humans are created in the image of God as either male or female and that life is precious. It says they value life and are committed to protecting it at every stage: the unborn, the orphan and the elderly.

"The pro-life movement never asks a woman to give up her life," Laura Macklem, press and political director for N.C. Values Coalition, said. "N.C. Values Coalition believes that in all circumstances possible, the effort should be made to save both the life of the mother and the baby."

The nonprofit works with organizations such as iVoterGuide and Susan B. Anthony Pro-Life America to rate candidates on their abortion-rights policies and canvass door to door. The N.C. Values Coalition's main criteria for endorsement of candidates is being pro-life, according to Macklem.

She said the organization was thrilled with the overturn of Roe v. Wade because it gives state governments the opportunity to analyze public viewpoints and puts the decision back into the hands of elected officials.

While groups like N.C. Values Coalition and NCRTL are supporting anti-abortion legislation through political advocacy, other groups in North Carolina are advocating against abortion through prayer and vigils.

The Chapel Hill campaign of 40 Days for Life, an international anti-abortion group, is organizing daily vigils outside Chapel Hill Planned Parenthood.

"40 Days for Life is there to be a prayerful, peaceful presence," Chapel Hill campaign leader Kathleen Siemer said.

Vigils such as these are often seen as antagonistic to people seeking care at reproductive health centers, Siemer said. However, she said she believes the prayers offered by 40 Days for Life are necessary for the wellbeing of mothers and children.

"Our politics are with the Lord," Siemer said. "Our organization is not political. We don't talk about politics because [abortion] is a spiritual war."

Although 40 Days for Life is an apolitical group, Siemer said she thinks the overturning of Roe v. Wade was a blessing and an answer to the prayers



DTH/ANNA CONNORS

A bumper sticker reads, "Smile, your mommy was pro life" on Saturday, Oct. 1, 2022.

of pro-life Christians. She said the court decision moves the legality of abortion to the state and people now have the ability to vote on the issue.

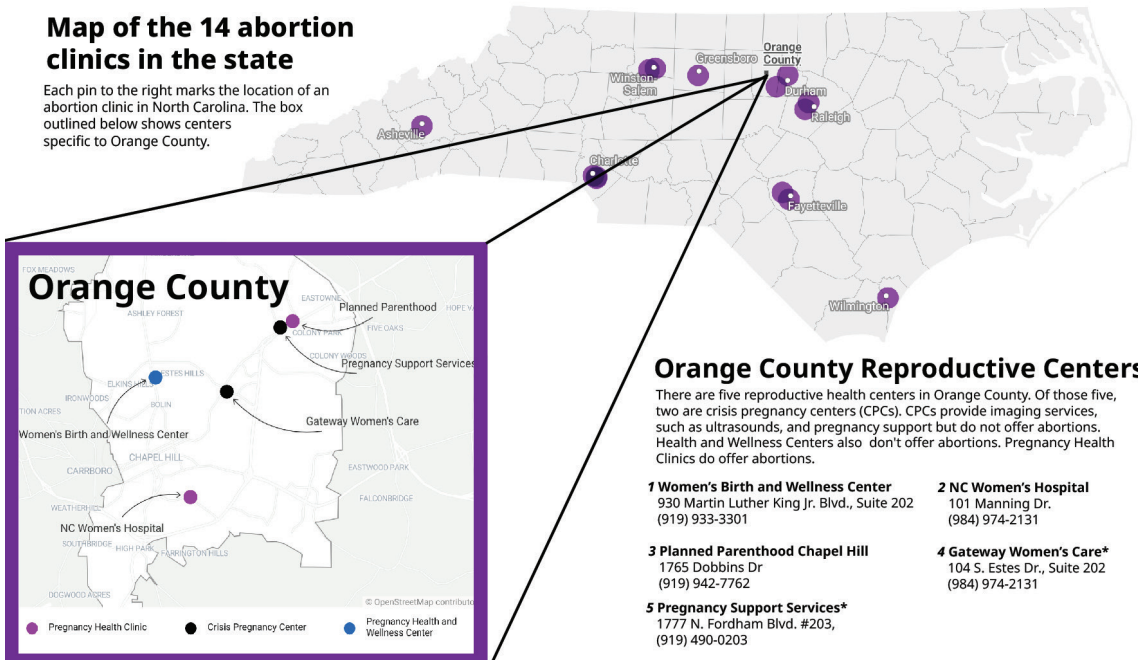
Siemer added that it doesn't change 40 Days for Life's work or philosophy, and they still plan to continue praying for women and children in their community.

Twitter: @DTHCityState

ABORTION ALTERNATIVES

Explaining crisis pregnancy centers

Where are the abortion clinics in the state?



CPCs provide support services but are not abortion clinics

By Gowri Abhinanda
Staff Writer
city@dailytarheel.com

Driving down Durham-Chapel Hill Boulevard, Chapel Hill residents seeking an abortion or reproductive care pass the Planned Parenthood Chapel Hill Health Center. Just three minutes away is the Pregnancy Support Services center.

While both organizations cater to pregnant people, they offer different services. Planned Parenthood offers abortions and PSS does not – it is a crisis pregnancy center, which often mirrors abortion clinics but doesn't provide abortion.

Across North Carolina, there are about 89 CPCs and only 14 abortion clinics. Additionally, the North Carolina General Assembly provides \$19 million to pregnancy centers, but no funding to abortion service providers.

What is a CPC?

CPCs provide parenting and adoption-planning resources, free pregnancy tests, limited first-trimester ultrasounds and support programs for families.

CPCs offer emotional support programs to individuals struggling with the decision to either continue or terminate a pregnancy. They also provide free distribution of supplies like diapers, baby formula, strollers, clothing and breast pumps.

They do not, however, provide abortions.

PSS Executive Director Cindy Kouhout said she finds the work her organization does to be vital in educating individuals about their options. PSS is a Christian CPC, like many pregnancy centers.

"It is such a difficult, challenging decision for any woman to make, so to have that safe place where you can just sit and tell your story and not have someone tell you what to do, that is one of the things that I love about PSS," Kouhout said.

PSS offers free support, which Kouhout said is made accessible by private donors, churches and Christian organizations' financial support.

She added that the funds PSS receives allows the organization to pay for transportation to their locations in Chapel Hill and Durham, which may not be accessible for low-income communities.

Lynette Drewery said she is happy she had access to PSS' services when deciding to have her son, as well as to support him effectively once he was born.

"My son is 16, and he goes to Durham Tech's Middle College," Drewery said. "He's an amazing individual, and I feel like I was the one blessed to be able to carry him and bring him to the world and raise him."

Controversy around CPCs

According to the American Medical Association Journal of Ethics, most CPCs do not have a medical license and lack licensed medical professionals on-site, leading to the spread of misinformation.

Misinformation has led to the inaccurate attribution of abortion procedures to serious mental health problems and cancer. CPCs' unlicensed status also allows them to avoid HIPAA or patient confidentiality laws.

Molly Rivera, the communications director for Planned Parenthood South Atlantic, said she is skeptical of pregnancy centers' practices.

"They are by and large religiously affiliated and explicitly anti-abortion and solely exist in order to dissuade people from obtaining an abortion, and the majority of that spread misinformation about abortion care," Rivera said. "They often mirror abortion provider aesthetics in order to trick people into coming there instead of the abortion clinic, and they often lie about the services they provide."

Individuals must attend religious classes or workshops to receive support from some CPCs, which Rivera said violates religious freedom.

"They often say that they are there to do things like provide free diapers to new parents or provide parenting classes, which on its face is a good thing," she said. "What they neglect to tell you is that these services come with strings attached."

Maya Hart, the North Carolina coordinator of SisterSong Women of Color Reproductive Justice Collective, said marginalized groups like low-income and BIPOC communities have historically faced violence from systems like the medical field.

BIPOC people often experience exploitation and dishonesty within the medical industry due to racially-motivated stereotypes, such as being less vulnerable to pain. Due to these stereotypes, some healthcare professionals lie or withhold treatments that can minimize pain for BIPOC individuals.

"These people are already entering these decisions and these environments with a certain amount of fear, rightfully so, because of the way historically-oppressed communities are already treated," they said. "When they show up to a place in this really vulnerable position and are shamed or told explicitly racist lies, that further perpetuates the violence that the same communities are already facing."

Hart added that the stigmatizing language around abortion and other parenting styles within these religious workshops contributes to the oppression of queer and transgender communities.

They said providing information, support, comfort and affirmation should be prioritized over judgement and stigma in these situations.

"When it comes to ideas around parenting and giving birth, there's already so much stigma against queer people and being told, 'You're wrong' or 'You're gross,' and that's not true," Hart said.

While these requirements exist for many pregnancy centers, Kouhout said PSS doesn't have criteria that must be met.

She said she recognizes the value of the classes but believes access to diapers and other post-pregnancy essentials is critical.

Twitter: @gowriabhinanda

MIDTERM ELECTIONS

Future abortion bans possible in North Carolina

A Republican supermajority could introduce a heartbeat bill

By Maggie McIntyre
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Fourteen states in the country either fully ban abortion or ban it after six weeks of pregnancy. North Carolina is not one of them – for now.

Since the U.S. Supreme Court overturned Roe v. Wade and a U.S. District Court reinstated a ban on abortions after 20 weeks in North Carolina, Republican state legislators have not introduced any bills that would further restrict abortion access.

There have not been any heartbeat bills introduced since, either. These heartbeat bills prohibit abortion after about six weeks of pregnancy.

However, North Carolinians' access to abortion could become more restricted if anti-abortion legislators are elected to the state's General Assembly in the upcoming midterm elections.

Republican legislators need three seats in the state House of Representatives and two seats in the state Senate to gain a supermajority in each chamber. A supermajority in both chambers would allow them to overrule Democratic Gov. Roy Cooper's veto.

"There's a very real threat that if Republicans gain a supermajority in both houses that they will be able to override the governor's veto on abortion or on legislation that would further restrict – if not ban – abortion, so this is a pretty high-stakes election," N.C. Rep. Allen Buansi (D-Orange) said.

Jillian Riley, N.C. director of public affairs for Planned Parenthood South Atlantic, said some anti-abortion legislators in the General Assembly have already said they plan to introduce a ban on abortion this winter.

However, Rebecca Kreitzer, an associate professor of public policy at UNC, said that public opinion is wary of restrictive policies with no exceptions.

Unlike some neighboring states, Kreitzer said the General Assembly did not convene in a special session to introduce more restrictive abortion laws before Election Day in November.

"I think that it's clear that there's not an appetite for the very restrictive abortion policies, like the six-week bans or the complete bans, in North Carolina," she said. "And I think that Republicans know that that would go a little bit too far for many North Carolinians."

Kreitzer said public opinion shows most people are supportive of legal abortion, with some exceptions. Polling data suggests that a majority of North

Carolinians don't want increased restrictions on abortion.

However, since Republican politicians hold a majority in the N.C. General Assembly, it is unlikely that policies protective of abortion rights will be introduced.

"Until we can elect enough pro-reproductive freedom champions, we will be not able to pass any type of proactive bill that would protect abortion," Riley said.

Buansi said the first action he took when he began his term on June 1 was to co-sponsor a bill that would have codified Roe v. Wade and remove some other restrictions on abortion. He said he and many of his Democratic colleagues remain in support of this bill.

Nearby states like Georgia have introduced heartbeat bills. Some, such as Tennessee, have completely banned abortion.

Buansi said there has been a strain on state abortion clinics because N.C. is one of two southern states where abortion is still legal.

"That has caused a big jam because there aren't enough clinics to serve everyone that needs that care," he said.

If North Carolina bans abortions, Riley said people will be forced to go to Virginia or Washington, D.C., to seek care.



DTH PHOTO ILLUSTRATION/SAMANTHA LEWIS

Heartbeat bills outlaw abortion, often before people even know they have become pregnant.

"My problem with making abortion illegal is that people will still find ways to get abortions whether or not it's legal," Kreitzer said.

Since 2020, the majority of abortions were medication abortions, rather than procedural abortions. Kreitzer said that, in 2022, if abortion was to become illegal in North Carolina, people might try to access illegal abortion medication rather than a procedural abortion.

She said there could be danger associated with illegal abortions since they are unregulated, but there is a

relatively low complication rate for both medication and procedural abortions – about the same complication rate as getting a root canal.

Buansi said he is doing everything he can to get candidates elected who support women's right to choose an abortion.

"I can't impress upon people enough the responsibility that we each have to go to the polls this November," Buansi said.

Twitter: @mmcintyre_02

ABORTION AND REPRODUCTIVE HEALTH IN NC

Chapel Hill and online organizations provide pregnant people resources, financial and legal assistance

By Allie Kelly
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On June 24, The United States Supreme Court overturned nearly 50 years of national precedent in eliminating the constitutional right to abortion.

The ruling to overturn Roe v. Wade gave individual states the power to set their own laws on abortion access, with almost half of U.S. states expected to ban or severely restrict abortion. North Carolina is one of the only Southern states where abortion is still legal — for up to 20 weeks of pregnancy.

For many, abortion access is an issue that has medical, financial and legal implications. Here's a breakdown of abortion and reproductive health care resources in the state:

FINANCIAL ASSISTANCE

The Carolina Abortion Fund

The Carolina Abortion Fund supports individuals with the financial and logistical aspects of getting an abortion. The fund operates a secure and confidential phone line: (855) 518-4603.

The phone line is only open on Mondays, and the fund will return calls within 48 hours. Callers will need to have a scheduled appointment to receive funding.

The National Network of Abortion Funds can also help individuals find abortion funds in their area. Abortion funds provide funding, travel, lodging and other financial support to individuals who need them.

LOCAL CLINICS AND RESOURCES

Planned Parenthood South Atlantic

Planned Parenthood provides affordable abortion services, birth control, emergency contraception, sexually transmitted infection care, pregnancy testing and counseling, as well as other sexual and reproductive health services. Care is available in person or via telehealth. In Chapel Hill, Planned Parenthood has options for in-clinic or medication abortion up to 19.6 weeks.

There are six Planned Parenthood clinics in North Carolina. You can visit during walk-in hours, book an in-person or telehealth appointment on The Planned Parenthood website or call (800) 230-7526.

A Woman's Choice

A Woman's Choice provides confidential abortion care at home or in-clinic for up to 19.6 weeks. The clinic also provides personal ultrasound appointments, emergency contraception, pregnancy testing, birth control options, STI & HIV testing and other reproductive health services.

A Woman's Choice has locations in Raleigh, Greensboro, Durham and Charlotte. Call (800) 298-8874.

Orange County Health Department

OCHD provides family planning services at its clinics in Chapel Hill and Hillsborough. Services are confidential and by appointment. The medical clinics provide free pregnancy tests, as well as counseling on birth control methods.

Call the Health Department Medical Clinic at (919) 245-2400.

Gynecology at UNC Campus Health

The gynecology clinic at UNC Campus Health provides contraception, IUDs and Nexplanon placement and removal, pregnancy testing, counseling and more by appointment.

Schedule an appointment online or call (919) 966-2281.

Student Health Action Coalition

SHAC is the nation's oldest student-run free clinic. The coalition helps provide free health care and services to uninsured and underinsured community members in Carrboro, Chapel Hill and Durham. The clinic does not offer free birth control at their clinic, but can help patients in the process of getting birth control free of cost. There are also options for affordable gynecological care, sexual health counseling and HIV/STI testing.

The coalition has interpreting services for Spanish-speaking and Mandarin-speaking patients. Schedule an appointment at (984) 538-1031.

PREGNANCY CENTERS

Gateway Friend's Care

With locations in Raleigh, Durham and Chapel Hill, Gateway Friends Care is a pregnancy center that offers pregnancy testing, ultrasounds, options counseling and STI testing. It is free and confidential. On its website, the organization said it wants pregnant people across the Triangle to "choose life." The organization does not offer abortions or abortion referrals.

Call the Chapel Hill location of Gateway Women's Care at (919) 537-8220 or text (919) 386-9373.

Pregnancy Support Services

Pregnancy Support Services is a Christian non-profit serving people in Durham and Chapel Hill. The organization provides confidential pregnancy testing and limited, first-trimester free ultrasounds, as well as post-abortion care — but PSS does not offer abortions or abortion referrals. PSS can also supply new parents with diapers and wipes, formula and baby clothes.

Call PSS at (919) 490-0203.

MENTAL HEALTH AND COUNSELING

All-options counseling

For all-options counseling and education about pregnancy and abortion options, individuals can make an in-person or telehealth appointment with Planned Parenthood South Atlantic.

UNC campus support systems

If you or someone you know is experiencing a mental health crisis, call the national helpline at 988. The line is available 24/7 via call or text, and is free and confidential.

UNC students who need assistance may contact Counseling and Psychological Services or Student Wellness. CAPS can be reached 24/7 by phone at (919) 966-3658. University employees can reach out to the Employee Assistance Program. University mental health resources can also be found on the Heels Care Network website.

A list compiled by The Daily Tar Heel's Editorial Board provides additional information on Chapel Hill and campus mental health resources.

LEGAL ASSISTANCE

Repro Legal Helpline

The helpline is a free legal service that can help people understand their legal rights if they live in a state that has restricted or banned abortion. Repro Legal Helpline can provide information about the law and ordering abortion pills online. The line can be accessed at (844) 868-2812.

Text Abby

Operated through the Carolina Abortion Fund, Text Abby is a free text line that can help pregnant people under 18 access abortion through a judicial waiver. Judicial waivers allow those under 18 to get an abortion in North Carolina without parental involvement. The service is free and confidential.

Text Abby at (844) 997-2229 or visit their online FAQ page.

ONLINE AND TELEHEALTH RESOURCES

Abortion Finder

Abortion Finder is a directory that connects people in need of an abortion with over 700 verified health centers across the country. Individuals can search by address to find the pills, services and procedures that are best for them.

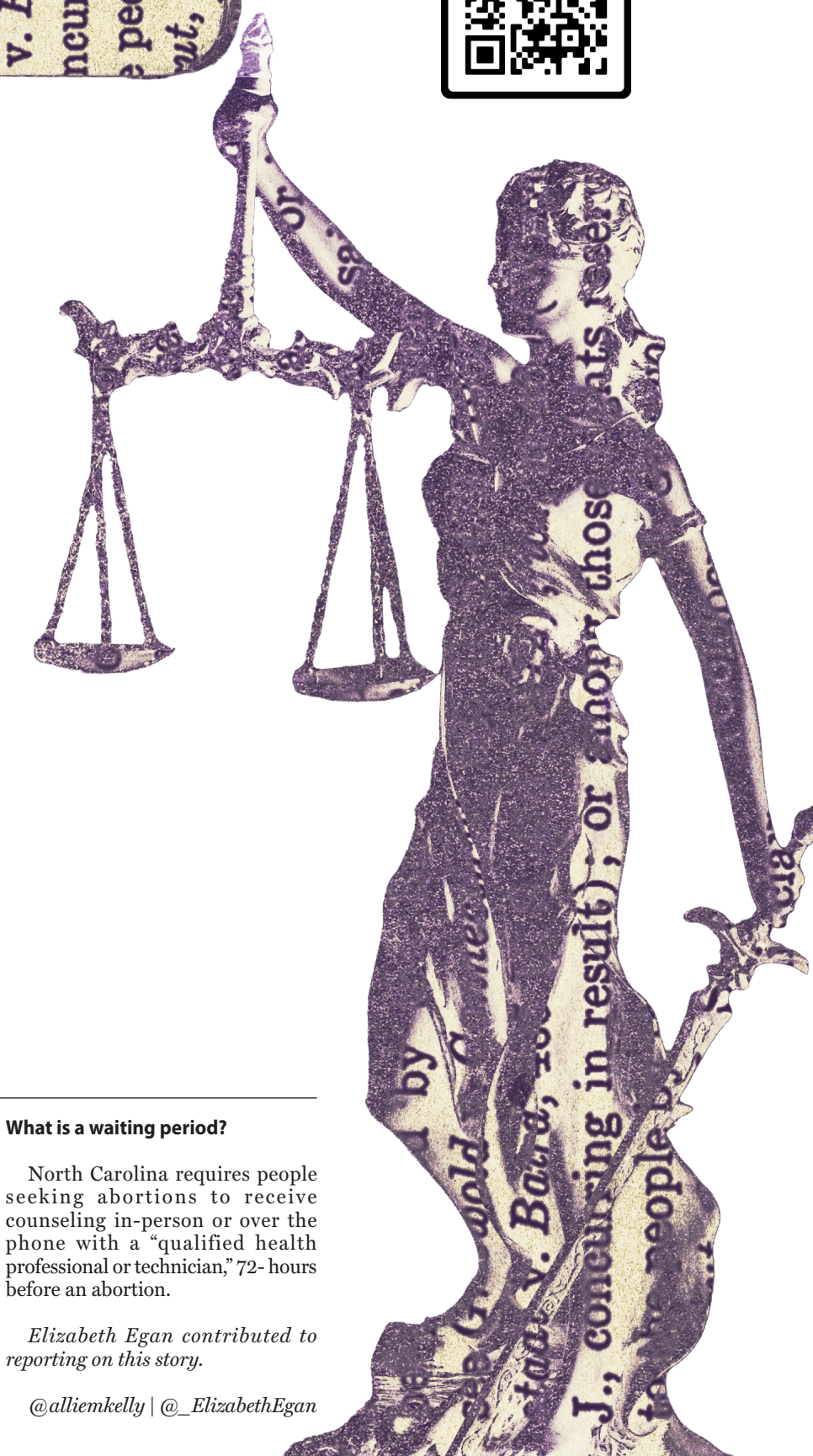
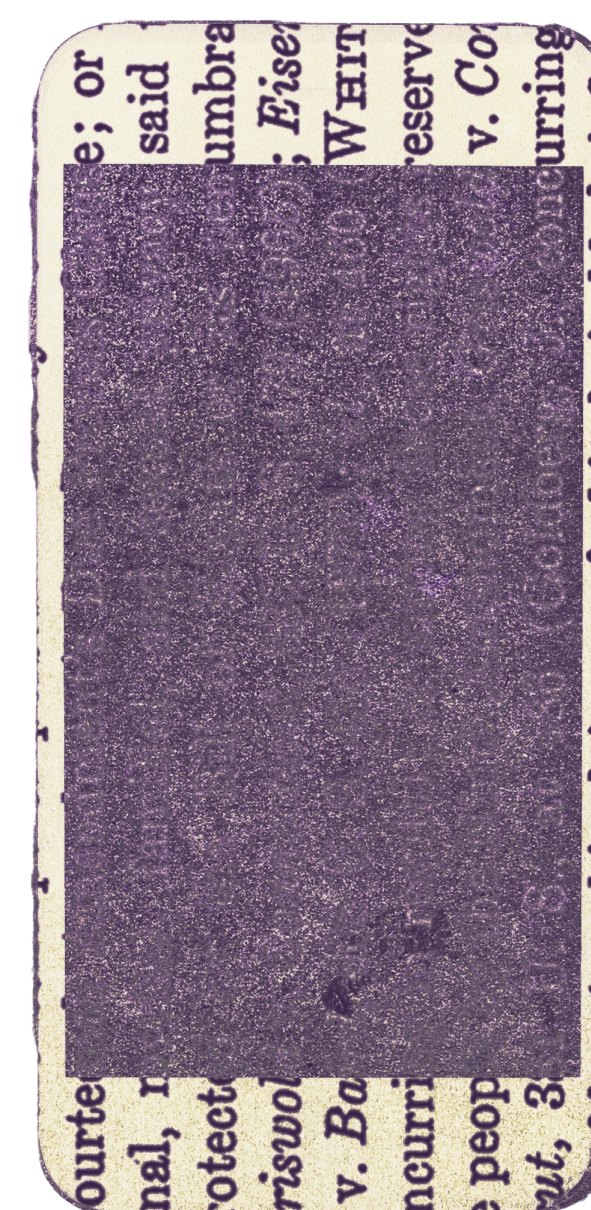
Plan C Pills

Plan C Pills is an online platform that provides accessible information on where to access abortion care in the United States. The website calls for universal access to abortion pills, and aims to destigmatize self-managed or at-home abortions. Individuals can search by state or territory to find aid access, online pharmacies and mail forwarding.

Hey Jane

Hey Jane provides fast, safe and affordable abortion pills shipped discreetly to your home. Medical providers are available for consult within 24 hours Monday through Friday. The virtual clinic delivers FDA-approved medication abortion within 1-5 business days. No appointment or in-person visit is necessary and financial assistance is available.

SCAN FOR THE ONLINE VERSION



FAQs

The Daily Tar Heel has compiled a list of frequently asked questions about abortion, contraception and other aspects of reproductive health care.

Where can I get a pregnancy test?

You can buy a pregnancy test at pharmacies and grocery

stores, typically for less than \$15. Pregnancy tests are also available for a low cost at most health clinics.

Where can I access emergency contraception?

The progestin pill — more commonly seen as Plan B or the generic morning-after pill — are available over-the-counter at most pharmacies for approximately \$10 to \$50. Campus Health Pharmacy and Student Stores Pharmacy sell affordable progestin pills.

Students can also find Plan B in the Healthy Heels Go vending machines on the main floor of the Student Union just outside the art gallery, and in the foyer of the Rams Head Recreation Center.

Ulipristal, or Ella, is available by prescription for around \$50, and often covered by insurance with a minimal or \$0 copay.

Is birth control safe and effective?

If you're sexually active and don't wish to become pregnant,

you can use birth control. When used correctly, hormonal birth control like the pill is up to 99 percent effective.

Are at-home abortion pills safe and effective?

According to Planned Parenthood, medication abortion — also called the abortion pill — is a both safe and effective method of ending a pregnancy.

The effectiveness of medication abortion depends on how far along

the pregnancy is, ranging from 98 percent effective at eight weeks to 87 percent effective at 11 weeks.

You may be able to receive a medication abortion up to 77 days or 11 weeks after the first day of your last period.

According to the National Women's Health Network, at home medication abortion is safe and available without a clinic visit and can be available by mail within a few days.

If I have questions about my reproductive health, who do I ask?

Planned Parenthood's Sexual Health Counseling & Referral Hotline offers anonymous and free information and support about a variety of reproductive health topics including birth control, emergency contraception, pregnancy testing and abortion services. The hotline can be reached by calling 800-258-4448.

The Orange County Health Department provides counseling on birth control and STI prevention at its clinics in Chapel Hill and Hillsborough. Gynecology

at UNC Campus Health also provides counseling services.

What is the difference between a clinic and pregnancy center?

Clinics provide abortion services, while pregnancy centers do not. Abortion clinics often provide other services such as birth control, pregnancy testing and STI testing.

According to Planned Parenthood, crisis pregnancy centers often appear to be similar

to abortion clinics. They offer free pregnancy tests, abortion counseling, ultrasounds, and post-abortion care but will not help patients get an abortion and do not provide birth control. They will also provide free supplies such as diapers, baby formula and clothing.

According to the American Medical Association Journal of Ethics, most crisis pregnancy centers do not have medical licenses or licensed medical professionals on the staff.

What is a waiting period?

North Carolina requires people seeking abortions to receive counseling in-person or over the phone with a "qualified health professional or technician," 72-hours before an abortion.

Elizabeth Egan contributed to reporting on this story.

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FUNDING

How much does getting an abortion cost in NC?

As legal standards around the procedure shifted, so have prices

By Abby Pender

Senior Writer

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Community Pregnancy Center of Lake Norman lists the following prices for abortion in N.C.:

Medication abortion (within 10 weeks gestation): \$350-\$650

Suction Aspiration/Vacuum abortion (6-12 weeks gestation): \$600-\$1000

Dilation and Curettage (13-16 weeks gestation): \$850-\$1600

Dilation and Evacuation (17-21 weeks gestation): \$1500-\$2100

Dr. Jill Hagey, clinical fellow in the UNC Department of Obstetrics and Gynecology, said there are many factors that contribute to the cost of abortion care, such as type of procedure, location and level of additional support. Most abortions in the United States are performed in the first trimester.

However, Hagey said one-day procedures will be of the lowest cost to patients while some have to undergo two-day procedures.

“Hospital-based care does tend to be a little bit more expensive when you’re talking about doing it in the operating room-setting just because of the number of team members that it takes to run the operating room in the safest way possible,” she said.

Planned Parenthood is typically the cheapest option for abortion care, Justine, executive director for the Carolina Abortion Fund, said. Private

clinics are typically more expensive than a Planned Parenthood but less costly than a hospital, she said.

“But Planned Parenthood may, in your area, have more restrictions on what they can or can’t perform,” she said.

In addition to the procedural cost, many individuals must evaluate supplemental expenses to their abortion care such as transportation, childcare and lost wages.

Someone seeking abortion care should be aware of the transportation required for their consultation and procedure. If sedation is involved, most clinics and Planned Parenthood require a patient to bring a driver with them.

Although transportation is often seen as a cost barrier to abortion, the Triangle area has a higher number of nearby clinics compared to other regions within N.C., said Alice Cartwright, a doctoral student within the Gillings School of Global Public Health who has researched abortion access.

In supplement to transportation expenses, some states offer telemedicine consultation for medication abortion. N.C. is not one of them. Telemedicine can save time and money if the pills are shipped rather than visiting a clinic, Cartwright said.

The Carolina Abortion Fund is one organization that has been able to expand their aid from mere procedural costs to holistic costs like gas money, lodging and food, compensation for lost wages and childcare support.

Justine said CAF provides the most supplemental funding



DTH/SAMANTHA LEWIS

A sticker for Carolina Abortion Fund draws attention to their services in a women's bathroom on UNC's campus.

support for childcare expenses and lost wages. The majority of people getting abortions in the U.S. are already parents, which is why childcare is a common hidden cost people seek aid for, she said.

Some insurance plans automatically cover abortion, but most require people to opt-in to this specific type of care, Justine said.

Student Blue, the UNC System's student health plan, provides students with limited abortion benefits. To receive additional benefits, a student must actively

enroll or call to change policies before receiving services.

Cartwright noted that although many people have insurance that might cover abortion, a lot of people don't want to use it in fear of who might see the charges on their insurance bill.

“You know, if (the students) don't share the same views as you it can be extremely difficult to ask like, ‘Hey, mom and dad am I covered for it?’” Justine said.

Thirty-four states, including N.C., do not cover abortion under

their Medicaid programs, with some limited exceptions.

Since the decision of Dobbs v. Jackson Woman's Health Organization, Hagey said that in-state clinics have seen an increased number of patients who are traveling from other states to North Carolina to receive care.

Hagey added that it is too early to know exact numbers for how abortion costs might increase in the aftermath of the Dobbs decision.

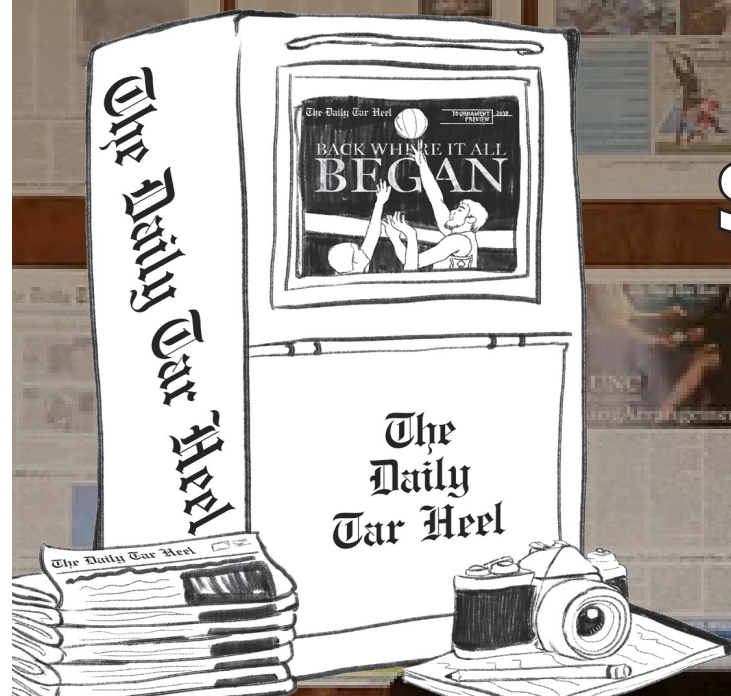
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STUDENT FEATURE

Flannery Fitch shares experience with hysterectomy

She said that the procedure provided her with “a sense of relief”

By Liv Reilly

University Editor
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The day that Roe v. Wade was overturned, Flannery Fitch picked up the phone and scheduled an appointment to meet with her doctor.

Fitch is a 35-year-old graduate student at UNC who has known from a young age that she doesn't want children. However, the overturning of Roe this past June was her last straw.

She wanted to get a hysterectomy.

A full hysterectomy is a medical surgery that removes both the cervix and the uterus, preventing any possibility of a future pregnancy.

Fitch said that having the procedure felt as if she had “reclaimed her bodily autonomy” — a term she said one of her nurses used after the surgery.

“To me, it doesn't have anything really to do with the concern over the unborn child,” Fitch said. “It's just a way of controlling women's bodies — and particularly controlling women. This is going to predominantly affect people who come from BIPOC or really low economic backgrounds. And that is just part of the system of how we maintain that status quo.”

Though the choice to get the surgery was empowering, Fitch said she also experienced emotions of anger.



Flannery Fitch, a UNC graduate and non-traditional student, smiles on the steps of Wilson Library on Oct. 10, 2022.

DTH/KENNEDY COX

“It's really infuriating that in order to claim our bodily autonomy, we have to have such a violating surgery and have things physically removed from your body,” Fitch said.

Corinne LaJeunesse, a longtime friend of Fitch, drove her to and from her appointment on the day of the surgery. She said that after knowing her for so long, she thought the procedure was the right thing for Fitch.

“I think it's good that she had this opportunity to go ahead and

make that decision for herself, especially in a time where things had just gone to a not-great place to be protected,” LaJeunesse said.

Because a hysterectomy is a non-reversible surgery, LaJeunesse advised those who aren't ready or don't want to make such a permanent decision to look into other proactive options.

“Surgery is a big thing,” she said. “It's not something to be taken lightly. Hopefully, birth

control is a little less intense than a surgery. But, if you're going to be sexually active and you don't want to have children, then you should definitely be considering your birth control options.”

Heather Donnelly, a fellow graduate student and friend of Fitch, advised individuals to fully trust themselves when handling reproductive health decisions.

They said Fitch knew what was best for her body, age and future.

“I feel like some people might read this story and they might ask the questions that most doctors ask of women of, ‘Was she actually prepared for that?’ or ‘Was this the right decision for her?’” Donnelly said. “And it absolutely was — this is exactly what she needed to do for her own health.”

The experience of having a hysterectomy is typically one that is viewed through a negative lens due to healthcare costs, availability, procedural mishaps or other factors, Fitch said. Though the permanent results and stigma of the procedure initially delayed her experience, she was happy with her medical care and results.

She was pleasantly surprised when her doctor met her request with encouragement rather than attempting to persuade her not to receive the surgery.

“It was nice to go into it with this feeling that everybody around me was excited and supportive of this thing, including other patients who, presumably some of them, were there for the same procedure,” Fitch said.

Though Fitch understands that a hysterectomy is not for everyone, she echoed Donnelly's concerns that each individual should listen to their own body.

However, Fitch said she is glad she no longer has to worry about becoming pregnant.

“There's now this sense of relief that at least I don't have to worry about that happening to me,” she said. “That's a big relief.”

Twitter: @livvreilly



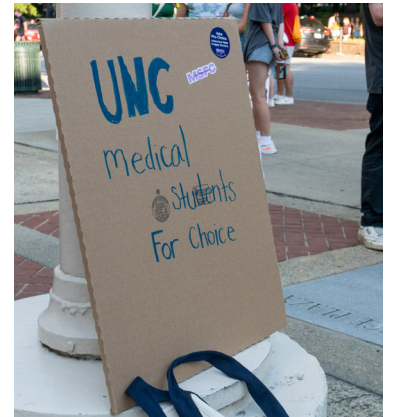
DTH PHOTO ILLUSTRATION/SAMANTHA LEWIS

DTH Photo Illustration. The overturning of Roe v. Wade has prompted many people to experience a range of emotions. As the future of abortion legality hangs in the balance, tensions remain high in discussions of reproductive healthcare.



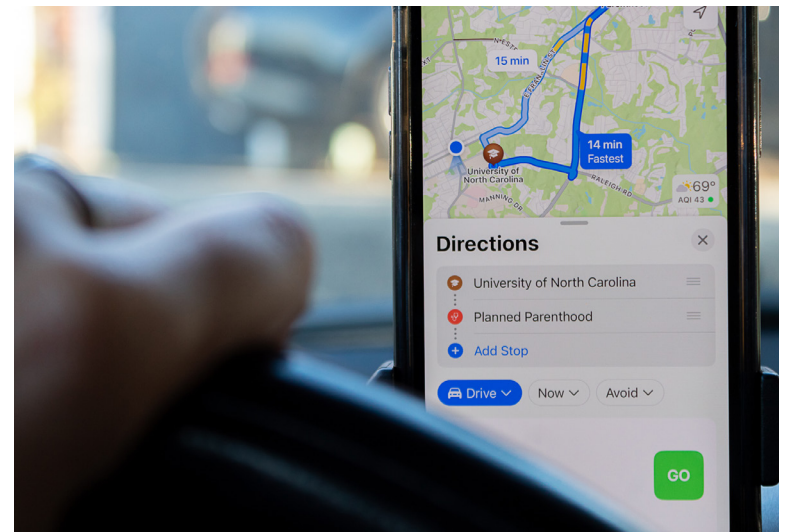
DTH/KENNEDY COX

A pro-life protester places a silicone model of a fetus in someone's hand outside of Planned Parenthood on Saturday, Oct. 8, 2022.



DTH FILE/KATE LEWIN

Dozens of people rally outside the post office on Franklin St. to protest the ban on abortions on Aug. 26, 2022.



DTH PHOTO ILLUSTRATION/KENNEDY COX

DTH Photo Illustration. Planned Parenthood is a resource for all people in need of reproductive healthcare, as their services are not limited to abortion.



DTH/KENNEDY COX

A pro-life protester shows a picture of a fetus while standing outside Planned Parenthood on Saturday, Oct. 8, 2022.



DTH/SAMANTHA LEWIS

Gateway Women's Care is a pregnancy crisis center located in Chapel Hill N.C. offering free services like, ultrasound, pregnancy testing and counseling.

ACTIVISM

Students work to promote sexual health

The group aims to create a reproductive health care network at UNC

By Natalie McCormick

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After *Dobbs v. Jackson Women's Health Organization* overturned *Roe v. Wade*, Anna Souhan, a sophomore at the University, refused to sit idly and watch her rights be put up for discussion.

Souhan heard about Planned Parenthood Generation Action, a branch of Planned Parenthood dedicated to making a change on college campuses regarding reproductive health, from one of her friends at a different university. When she realized that UNC did not have its own chapter, she decided to start her own, of which she is now president.

"I couldn't really find any other organizations that dealt with (abortion), so I felt like I should start one," Souhan said. "And then it just became the process of reaching out to people like advisors and my friends who might be interested in this and talking to the school. So it just ended up working out really well."

There are over 350 PPGA chapters around the country at different universities with the main goal of promoting a network of young activists, educating people about sexual health and creating a

lasting change on these campuses, according to the PPGA website.

Victoria Pittman, the field organizer of Eastern N.C. for Planned Parenthood South Atlantic, works closely with six chapters of PPGA on different North Carolina campuses — one of which is the chapter at UNC.

"Planned Parenthood Generation Action is a network of young organizers and activists across the country," Pittman said. "We have 20 chapters in our affiliate, which is Planned Parenthood South Atlantic, and we are continuing to grow."

PPGA's influence varies by campus, depending on the political atmosphere of the institution. According to Pittman, one PPGA chapter that she works with has been trying to get a reproductive health vending machine on campus but has received pushback from the school.

"The great benefit of being a Generation Action chapter on a liberal campus is that you have a lot more freedom and range to do really important work," Pittman said. "We are not sure what that is going to look like on UNC's campus yet but I'm really excited to see where they put their efforts."

One of the main goals for the UNC chapter of PPGA this semester is to create a comprehensive reproductive health network in N.C., ranging from raising awareness about resources available at UNC Campus Health Services to awareness about clinics at which one can receive reproductive health care.



DTH/ANGIE TRAN

UNC junior Marshall Graham, sophomore Anna Souhan, junior Jean Camejo and sophomore Sarah Zhang pose for a portrait at the Old Well on Monday, Oct. 10, 2022.

The PPGA chapter at the University is currently seeking volunteers to accompany patients to Planned Parenthood Chapel Hill and members to participate in panels to be held later in the semester.

"We want to be an organization where people can come and talk about this. We want to be a safe space," Souhan said.

Hayley Guerry, a sophomore at the University, is the vice president of PPGA at UNC. Throughout high school, she said she volunteered at the Orange County Rape Crisis Center. When she saw Souhan's post on Instagram that she was starting a chapter of PPGA at UNC, she said she immediately wanted to be a part of it.

"Having seen first hand, I want to be able to give people the resources to get involved and help with those personal experiences," Guerry said.

The Daily Tar Heel reached out to UNC Students for Life via email and did not receive comment for this story.

Twitter: @nataliemcc212

SAFER SEX

A look at contraceptive resources available on campus



DTH/SAMANTHA LEWIS

DTH Photo Illustration. Ella is an emergency contraceptive to be taken within 72 hours after unprotected sex in order to prevent pregnancy.

By Lauren Rhodes

Staff Writer
university@dailytarheel.com

Supplies are available for students through Campus Health

Contraceptives — including condoms, emergency contraception pills and birth control — can lead to safer sex and fewer accidental pregnancies. But some UNC students struggle to access them, whether it be because of cost, privacy or awareness.

A 2017 study by the Guttmacher Institute, a sexual and reproductive

health organization, found that the improved access and use of contraceptives leads to fewer unwanted pregnancies, and thus a lower rate of abortions.

The study also found that public efforts to increase access to contraceptive methods often proves effective.

Put simply, if college students have access to contraceptives, they are less likely to experience an accidental pregnancy — and potentially an abortion.

Safer sex supplies are available for free at UNC Campus Health Services, the Student Stores Pharmacy and in the Student Union. Students can order, refill or get prescribed birth control through Campus Health.

A variety of emergency contraception pills can be purchased at Campus Health or Student Stores Pharmacy. They are also available in the "Healthy Heels to Go" vending machines located in Rams Head Recreation Center and the Student Union.

Farah Flowers, a residential advisor in Horton Residence Hall, said part of her job is to supply the students in her residential hall with support and resources. One of the

ways she does this is in by helping them to access contraceptives.

"I think it's important that we provide the means for people who don't want to get pregnant to not get pregnant," she said.

Though RAs are not trained on directly providing students with contraceptives, they are trained to help students access resources through Campus Health, Flowers said.

Campus Health also has a contraceptive request form on their website, through which students can receive safer sex supplies directly to their living spaces.

Laura Saavedra Forero, co-president of the Campus Y and reproductive rights activist, is working to increase accessibility of contraceptives on campus.

"I personally didn't even know that you could easily get them at different places on campus," she said. "I still think that they're not as accessible as they can be."

Saavedra Forero said students commonly struggle to access contraceptives for various reasons including cost and lack of supply.

On campus, emergency contraception can cost anywhere

from \$10 to \$70. Working with a pharmacist for prescriptions or other needs through Campus Health has an additional convenience fee of \$30.

Accessing birth control on campus can also be challenging, according to students.

Alana York, a first-year at UNC, said that while she found contraceptives to be accessible on campus, she has been working for three weeks to transfer her preexisting prescription to the school pharmacy.

York said she believes all people on campus should have the right to easily access contraceptives.

Saavedra Forero said the Campus Y hopes to soon supply free sexual health items, including emergency contraception pills, condoms and pregnancy tests through its pantry.

Beyond access, she said education and spreading information are important tools to promote sexual and reproductive health on campus.

For more information on how to access contraceptives, students can email questions about safer sex supplies on campus to letstalkaboutit@unc.edu.

Twitter: @dailytarheel

BRIEFS

UNC men's soccer defeats struggling Virginia Tech in Friday night matchup

The North Carolina men's soccer team (5-3-2, 2-2-1 ACC) defeated the Virginia Tech Hokies (2-9-1, 0-5 ACC), 2-0, Friday night at Dorrance Field. Both teams exchanged scoring chances in the early moments of the first half, but neither squad capitalized. A timely substitution by head coach Carlos Somoano paid dividends immediately, as redshirt junior Key White's strike gave the Tar Heels a one-goal advantage. UNC would continue to find holes in the Hokie defense, and fifth-year midfielder and defender Milo

Garvanian's goal from outside the box helped North Carolina secure the win.

- Evan Rogers

As offense falters, defense steps up in UNC football's victory at Miami

For most of the season, the North Carolina football team's defense was its biggest liability. But in Saturday's nailbiter at Miami, when the high-scoring offense sputtered in the second half, big defensive plays sealed the Tar Heels' 27-24 victory. Now at the halfway point of the 2022 campaign, the five-win Tar Heels have much to be optimistic about.

If Assistant Head Coach for Defense Gene Chizik can continue to foster the growth that his unit has shown over the past two games, this UNC team could hit its stride at the perfect time.

- Lucas Thomas

No. 1 UNC field hockey earns 3-0 shutout win over No. 12 Connecticut

Outshooting the UConn Huskies (8-4, 3-1 Big East), 23-8, the UNC field hockey team (11-0, 3-0 ACC) added another shutout win to its undefeated record with a 3-0 victory. North Carolina's season-long strength has been stifling opponent

corner opportunities, and it did so in the second quarter by stopping three consecutive UConn corners. Sophomore goalkeeper Abigail Taylor's three saves — all made in the second quarter — tied her season-high from two days prior at Boston College. With 10 shots and two goals, senior forward Erin Matson is now tied for the ACC career scoring mark with 306 points.

- Kaitlyn Schmidt

Early second-half goal sparks UNC women's soccer to 2-0 win over NC State

Fresh off a four-goal performance against Pittsburgh on Thursday, the

North Carolina women's offensive persistence carried forward into its Sunday afternoon match against North Carolina State. Following a number of quality saves from Wolfpack keeper Maria Echezarreta, the Tar Heels had no choice but to keep pushing, which was eventually rewarded with a goal from sophomore forward Emily Murphy. After a first touch, junior midfielder Avery Patterson delivered a bottom-corner strike to give North Carolina a 2-0 lead early in the second half. That scoreline held until the end of the game, ultimately becoming the final score of the Tar Heels' 400th home victory in program history.

- Hunter Nelson

Opinion

The Daily Tar Heel

EDITORIAL

UNC's (lack of a) response to Dobbs

Other universities have acted since June, but this one has yet to

Within hours of *Roe v. Wade* being overturned on June 24, universities across the United States issued their responses, varying in opposition, support and neutrality. UNC has since offered its silence.

The ruling did prompt reactions from leadership within UNC, though none on behalf of the University. Chairperson of the Faculty Mimi Chapman released her own statement, calling on colleagues to engage as “health and well-being are so threatened.”

Barbara K. Rimer, dean of the Gillings School of Global Public Health, expressed her criticism for the politicization of abortion, stating that the Supreme Court decision will exacerbate inequities in the country. But even her message began with a disclaimer: “The views expressed in this message are Dean Barbara K. Rimer’s alone and do not represent the views and policies of the University of North Carolina or the Gillings School.”

The University has stood idly by, at least in the public-facing sense. On campus, it appears to have a different attitude — it continues to offer robust reproductive health resources: free safer sex supplies, subsidized contraceptives for purchase, gynecology services, pregnancy testing and counseling. Even in this flip-flopping, the message UNC sends is rather clear: It cares, but only behind closed doors.

As an institution that consolidates experts on public health (we boast the number one public school of public health)

— with medicine, law, ethics and reproductive health-adjacent fields, all on one campus — it is bizarre that UNC has not been proactive in the conversation on abortion.

The University is a much-needed source of authority in a changing and divided political landscape that should be taking charge to educate and engage its community in informed dialogue, especially when these changes in reproductive rights impact the majority of UNC’s population. We can’t imagine that a university’s priorities should lay elsewhere when so much valuable knowledge and research lies at its disposal.

It should heed the example of the University of Michigan, which, post-Dobbs, organized the online “*Roe v. Wade* Teach-Out” to help students learn about abortion rights history, legal challenges and the ruling’s implications.

It is important that the University lends itself to those who face limited access to reproductive and abortion services. This includes out-of-state students, who may be subject to varying regulations in their home state and might be looking to North Carolina for refuge.

While the University can’t enroll more out-of-state students because of a System-wide rule that caps enrollment at 18 percent, it can still be a resource for navigating potential legal challenges and obtaining healthcare by providing free access to University legal services and connecting them with abortion providers and counseling.

While the University has not made it clear whether or not Carolina Student Legal Services is available to students seeking abortions, UNC Media Relations recommended that students talk to their Campus Health provider



The Old Well is pictured on Oct. 10, 2022.

DTH/SAMANTHA LEWIS

about reproductive care options available to them.

Reproductive care options that — in the wake of the state’s reinstated 20-week abortion ban — are increasingly fleeting.

It is also equally important to be supportive of students from rural North Carolina, who make up 40 percent of the 2022 freshman class. Rural residents face decreasing access to abortion services (91 percent of counties don’t have an abortion clinic and rural hospitals are closing obstetric units) and may rely on UNC to receive this care.

It is critical to also recognize the University and its alumni’s direct influence on reproductive legislation and regulation.

Our graduates include state legislators, the current Governor (who signed an executive order protecting abortion access after

Dobbs), members of the U.S. Congress and public health officials. William L. Osteen Jr., the federal judge responsible for reinstating North Carolina’s 20-week abortion ban, graduated from UNC and its law school. By default, as an educational institution, the University assumes a role in affecting the political climate and the livelihoods of the public it serves.

Even as a campus, UNC is recognized as having high civic engagement through student voting. The University needs to match the commitment that its students consistently exhibit.

UNC should work to move the needle on local abortion rights and access — on campus and beyond.

Twitter: @dthopinion

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COLUMN

Judicial elections are crucial for reproductive rights



DTH GRAPHIC/ALAN HUNT

By Sophie Teague
Columnist

Midterm elections will be held on Tuesday, Nov. 8. It will be one of the most pivotal elections of our generation for reproductive justice.

Races on the ballot in North Carolina this election include one U.S. Senate seat, 14 U.S. House seats, several state offices including the General Assembly, Supreme Court and Court of Appeals, local judges and prosecutors and many county offices.

This year’s elections are incredibly

important for abortion rights, as they are now left up to the states after the reversal of *Roe v. Wade*. Although all races are important this season, one race in particular plays a key role in the future of N.C. abortion rights, even though it tends to fly under the radar for voters.

It is time to start paying attention to the North Carolina Supreme Court elections.

The U.S. Supreme Court receives a lot of attention across the country — as it should, it’s extremely important — but little attention is

often paid to state Supreme Courts, which influence the interpretation of state laws, including laws regarding abortion access.

The North Carolina Supreme Court is the state’s highest appellate court and consists of six associate justices and one chief justice. The political composition of the Court heading into this election is three Republicans and four Democrats.

Two North Carolina Supreme Court justice seats are up for partisan election this season. Two

newcomers, Lucy N. Inman (D) and Richard Dietz (R), are running for Seat 3, while incumbent Sam Ervin IV (D) is staving off a Seat 5 challenge from Trey Allen (R). The main function of the North Carolina Supreme Court is to interpret the law in questions that have arisen from lower courts.

If questions concerning abortion arise from lower courts, the North Carolina Supreme Court has the ability to decide the legality of that abortion. This means that the election of Supreme Court justices plays a key role in state abortion rights.

The North Carolina Supreme Court has the ability to interpret our state constitution’s laws, which directly influences policy in North Carolina. It is our state Supreme Court that has the final say in interpreting North Carolina’s constitution, rather than the U.S. Supreme Court. Our Supreme Court can even extend our rights further than the U.S. Supreme Court, as the nation’s highest court establishes only the minimum extent of our rights. We can still be guaranteed more protection from our state Supreme Court, but only if we take our concerns to the polls in November.

The midterm elections are extremely important for voter turnout, as these races have the ability to alter abortion rights in the states. The problem is that young

people are less likely to vote.

Young people spearhead many other forms of political activism such as rallies, mass protests and social media political engagement. But when looking at the 2020 presidential election, only 50 percent of those aged 19-29 voted, compared to 66.8 percent as the national average for voter turnout overall. This turnout is not due to lack of interest, as we see so many forms of political activism led by young people.

According to “Making Young Voters,” written by John Holbein and D. Sunshine Hillygus, talking to *The New York Times*, “the number of young people who express an interest in elections (76 percent), care who is president (74 percent), have interest in public affairs (85 percent), and intend to vote (83 percent) is especially high.”

This suggests that our generation has the power and passion for political change — we just have to take that to the ballot box. Voting sends a direct message to those in power about what rights we demand from them. Whether it be voting rights, LGBTQ rights, or reproductive rights, we have the ability to push for them.

Our passion must be taken to the polls, because our reproductive freedom is on the line in 2022.

Twitter: @sophhteague

ROE BY THE NUMBERS

What happens without the right to choose

By Noelle Harff
Columnist

I walk down the street, defensively, as a man shouts or whistles. I am a woman.

My body isn't the sanctuary of my own mind, but flesh for them to observe. I am not my *own*, I am an object of theirs.

Though sad, it's not surprising that many Americans believe they have the right to a woman's body. Still, those who fought for reproductive justice before me have acted with courage, claiming the spot where I stand today.

But on June 24, *Roe v. Wade* was overturned.

Overturing *Roe* leaves 120,000 women unable to reach a provider if seeking an abortion, according to an economic policy advisor at Third Way. Advocates have told their heroine stories of choice. In spite of their bravery, most stood idly by watching the people they "love" have their freedom torn from them.

This is not another story, but an aggregate of the tragedies that transpire without a person's ability to choose — by the numbers.

1 in 4

women in America are expected to have an abortion in their lifetime, based on current abortion rates.

50%

of abortion recipients are living below the poverty line.

\$105 B

is the annual cost to respective state economies from abortion restrictions.

62%

of Americans believe abortion should be legal.

30%

more women participated in the labor force following the 1972 *Roe v. Wade* decision.

a 40%

decrease in the gender pay gap from 1970 to 2020 occurred due largely to the freedoms granted by legal access to abortions.

78%

more debt that was at least 30 days overdue is held by women who had been denied a wanted abortion as compared to those who were granted abortions, according to a study by the National Bureau of Economic Research.

an 81%

increased chance of poor financial outcomes, like bankruptcies and evictions, were faced by women who were denied wanted abortions in comparison to those who were granted abortions, according to the same study.

a 33%

increase in maternal mortality may be faced by Black women following a nationwide abortion ban.

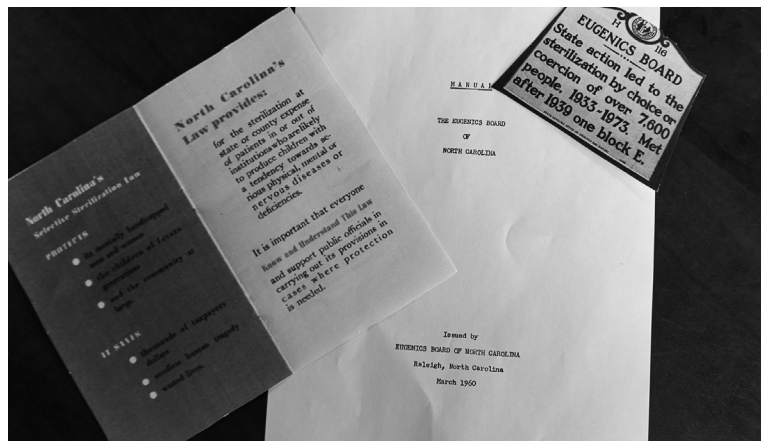
\$11 to \$15k

increase in annual earnings was seen by women under the age of 20 who had access to abortions.

Twitter: @hoelleharff

COLUMN

A long history of controlling people's bodies



DTH PHOTO ILLUSTRATION/KENNEDY COX

The North Carolina Eugenics Board performed forced sterilization practices until 1973.

By Zari Taylor
Columnist

Content Warning: *This article contains mentions of eugenics.*

It's been nearly four months since the United States Supreme Court overturned the constitutional right to abortion, triggering restrictions in numerous states and a national debate on reproductive rights. The regulation of women's bodies has a long history in the U.S., not only regarding abortion, wherein women exercise the autonomy to make decisions, but also the forced sterilization of women — in which the state made decisions on their behalf.

More than 60,000 people were sterilized in the U.S. in the 20th century on the basis of eugenics — the majority of them women. Eugenics is a belief that future generations of humans could be improved through the careful selection of who reproduces. It was greatly influenced by Charles Darwin's theory of natural selection and used scientific language to justify discrimination against those deemed "unfit" to have children.

The U.S. was a leader in eugenics, with Indiana passing the world's first sterilization law in 1907. Over 30 states followed suit, with sterilizations peaking in the 1930s and 1940s.

While sterilization began by targeting "mentally defective," "feeble-minded" or disabled individuals, it soon became a means of population control for non-white racial groups.

Forced sterilization in some parts of the south specifically targeted poor Black women. The procedure was referred to as the "Mississippi Appendectomy," coined by civil rights activist Fannie Lou Hamer, who advocated against involuntary sterilization after she was sterilized against her will during the removal of a uterine tumor.

Some teaching hospitals across the country performed these procedures as practice for medical students. State laws protected this inhumane violation that exposed women to unwanted hysterectomies without informed consent or a valid medical reason.

Despite the initial ruling in favor of abortion rights in *Roe v. Wade* in 1973, sterilization continued throughout the 1970s, particularly for populations deemed "undesirable." A study by the U.S. General Accounting Office found that 3,406 American Indian women were sterilized without their consent between 1973 and 1976.

In 1975, a class-action lawsuit claimed the Los Angeles County USC Medical Center systematically sterilized Spanish-speaking mothers

who delivered their babies via cesarean section. Though the hospital won the suit, the case exposed disturbing practices including coercion for consent and the exploitation of non-English speakers. This led to the repealing of California's sterilization law, which had previously been upheld since 1909.

Many states still allow forced sterilization, which continues to threaten the reproductive rights of disabled people.

North Carolina is one of the few states where sterilization has been banned, but it was also one of the states infamous for the practice. The first sterilization law in the state was passed in 1919, but the practice did not begin until the passage of a 1929 law, which also created the North Carolina Eugenics Board. The last recorded sterilization was performed in 1973, and the eugenics law was not unanimously overturned until 2003.

The history of eugenics and sterilization also bears relevance to our University. Edwin Alderman, an alumnus, served as University president from 1896 to 1900. After his time here, he worked as the first president of my alma mater, the University of Virginia, for over 20 years. While there, he recruited scientists who practiced eugenics, conducting research that supported the Racial Integrity Act which prohibited interracial marriage, and the Eugenic Sterilization Act. Edwin Alderman remains the namesake of Alderman Library at UVA, as well as Alderman Residence Hall on our campus.

Sterilization is not identical to abortion, but the racial implications are parallel. Non-white women were more likely to be impacted by forced sterilization practices, and these women remain most impacted by restrictions on abortions.

Racial and ethnic data shows that the abortion rates for Black and Hispanic women are nearly triple and double that of white women, respectively. Some research attributes these disparities to the

lack of access to and effective use of contraceptives. Many racial justice and women's rights activists have spotlighted how restricting abortion will do more harm to non-white women who already face financial and structural barriers to accessing medical care.

How can forced sterilization that focused on stopping minority populations from growing and abortion restrictions coexist? One possible reason could be the decline in white birthrates and the "browning" of America, as the Milwaukee Independent describes.

The U.S. Census Bureau reported that the white population fell from 63.7 percent in 2010 to 57.8 percent in 2020, driven in part by falling birth rates among white women. Although white people continue to be the dominant racial group, our country's population is more racially and ethnically diverse than ever before. The historical legacy of forced sterilization reflects efforts to control racial populations and so it could be that the current legal battle around abortion does the same.

And forced sterilizations are not so far in the past.

In 2020, a formal complaint was filed, alleging that unnecessary hysterectomies were being performed on immigrants in the custody of a U.S. Immigration and Customs Enforcement center in Georgia. This very recent incident echoes both the racial and paternalistic undertones of reproduction rights within our country, evident in the ongoing battle over abortion.

It's unclear how this battle may end, but it is clear that this history should be corrected and women should be protected from reproductive violence. Though it would not change the damage done and the lives impacted, it would grant women the right of bodily autonomy to make choices for their own future.

Twitter: @_zarialyssa

COLUMN

Reproductive rights, Republican hypocrisy

By Sophie Teague
Columnist

On Sept. 13, Sen. Lindsey Graham (R-SC), introduced the Protecting Pain-Capable Unborn Children from Late-Term Abortions Act.

Graham and his team claim that the legislation would federally ban abortion after 15 weeks of gestation — supposedly when unborn children can feel pain, although this claim is a contested one.

This act leaves in place state abortion bans that are more restrictive and allows for abortions after 15 weeks only in situations involving rape, incest or risks to the physical health of the pregnant person.

Graham's proposed bill is not only receiving backlash from Democrats, but also from many Republicans who declared that abortion laws should be left up to the states.

Graham himself once shared this sentiment, before reversing his position with this proposal. In this very bill, he cites the Supreme Court case *Dobbs v. Jackson Women's Health Organization* — the case that overturned *Roe v. Wade*: "[i]t is time to heed the Constitution and return the issue of abortion to the people's elected representatives."

This excerpt from *Dobbs* is meant to give the right to create abortion restrictions back to the states — and it is in direct disagreement with Graham's goal of creating a federal abortion law. Not only is this bill a serious violation of reproductive freedom, it is also a hypocritical effort to satisfy the conservative need for control over people's bodies.

Senate Minority Leader Mitch McConnell (R-Ky.) — one of many Republicans who prefer the issue of abortion be left up to the states — has failed to throw his full support behind Graham's bill.

Graham has also previously expressed support for abortion being handled at the state level. In May, he tweeted: "That, in my view, is the most constitutionally sound way of dealing with this issue and the way the United States handled the issue until 1973."

Obviously, his views on this have changed.

Graham's bill arrives just before the November midterm elections, where abortion rights will be a contentious issue. Many Democrats argue that a Republican majority in Congress would lead to more restrictions on reproductive rights, and have used Graham's proposed bill to bolster this claim.

But Graham thinks his proposed federal abortion ban should be a part of the midterm elections campaign process for Republicans. He wants his bill to represent the consensus view of the majority of groups opposing abortion rights.

Although abortion remains a fairly partisan issue, there are ideological differences within both the Democratic and Republican parties over abortion. These differences are extremely evident within the GOP.

Sixty-one percent of adults in the U.S. believe abortion should be legal in all or most cases, compared to only 37 percent who believe abortion should be illegal in all or most cases. This suggests that Graham's bill will



PHOTO COURTESY OF KEVIN DIETSCH/GETTY IMAGES/TNS
U.S. Sen. Lindsey Graham (R-SC) speaks during a news conference at the U.S. Capitol on July 30, 2021 in Washington, DC.

most likely face disapproval from many voters who will be heading to the polls in November.

Republicans are hoping to take back control of the House and Senate, but this effort to impose a national abortion ban might help inspire a Democratic victory. Abortion rights advocates are using Graham's proposed bill to build further support for Democratic candidates.

Democrats are predicted to keep control of the Senate. While Republicans are predicted to win a majority in the House, the odds have moved slightly toward Democrats after the *Dobbs* ruling. Meanwhile, polls indicate attitudes on abortion shifting towards for "pro-choice" ideologies after *Roe* was overturned.

Some Republican candidates have even moderated their views

on abortion as campaigns continue, despite their previously expressed positions on abortion.

It seems as though the Republican Party is unclear as to where it stands on abortion rights — whether the power should be left up to the states or the federal government and whether abortion restrictions are a strong or weak aspect of the Republican campaign.

Either way, if you are an advocate for reproductive freedom like me, you can trust that the Democratic Party will make abortion rights and reproductive freedom a major campaign topic in the midterm elections. This should further inspire you to head to the polls in November and vote to protect abortion rights.

Twitter: @sophhtague

COLUMN

What my sexual assault taught me about abortion rights

By Brianna Brigman
Guest Columnist

Content Warning: This article contains descriptions of sexual assault.

The first time it happened was during my freshman year of high school. I had only just had my first kiss the year before. I had never done anything else with anyone.

I remember after it happened. I walked into the front door of my family's apartment, shut the door and my body fell to the ground. I automatically began crying.

I knew what had happened was wrong but I kept trying to justify his actions internally.

"Did he mean it?"

"Maybe I am being dramatic."

"He will apologize, it wasn't that serious. He's like my best friend."

I was wrong.

This was the first, but not the last encounter I had with sexual assault.

Since it happened, it has affected my relationships, especially with men. It made it harder for me to trust people.

I didn't really tell anyone openly until I got to college. Then, it happened again.

I was at a frat party and I was intoxicated. I don't really remember much, I just remember the silhouette of the couch I was on and the sound of his voice.

I felt trapped. I felt like I couldn't say no. When I did say no, I was ignored. I told myself I just let it happen.

Was I the problem? Did I do something to provoke these men into doing what they did to me? The real answer is no, but in my head it felt like yes.

I hate the word "victim." It makes me feel like people must



DTH/SAMANTHA LEWIS

Brianna Brigman, a sophomore at UNC, discusses her experience with sexual assault and how it impacts her perception of abortion rights.

feel pity for me. But it is never the "victim's" fault. Ever.

I blamed myself a lot after my assault. I thought that if I would have done things differently, then it wouldn't have happened to me. I wondered if I had done something for him to do what he did.

I think the hardest thing about my assault is that I knew all of them. They were people I trusted and/or loved. Sometimes I wonder if I could forgive them, and act like it didn't happen, but it isn't that easy. I used to get triggered when I saw the faces of my assaulters or even heard their names.

It took a lot of courage and growth to get to where I am now. I would have never thought last year that I would be able to comfortably talk about what happened to me if anyone would believe me or not. Now, I don't care if people

believe me. I know what happened and eventually I want the men who hurt me to be held accountable. I am just not there yet — and that's okay.

Healing is not linear. I want people who have faced sexual assault to know that it is never their fault. You didn't ask for it. You are not the problem.

I want them to be able to take back their power. Take back their voice.

I was afraid people would look at me differently when I told my story. But it feels good to have my voice back.

I will not let this define me. I want to bring awareness to how sexual assault happens on UNC's campus, as well as other colleges and elsewhere. This is not a woman's or man's issue; it is a societal issue. There will not be change unless we make it known that these things affect people.

Roe v. Wade was overturned this June. I was working when it happened. I remember looking at the TV as the news played and I stood at the host stand. I read the headline over and over again, "U.S. Supreme Court Overturns Roe v. Wade" wishing it was not real. I thought about all the times I was assaulted and how fortunate I was to never get pregnant.

Not everyone has that kind of luck.

There are women who now must carry a child that they do not want. It should not matter why a woman does not want a child — it is their decision. There doesn't have to be a reason. Some people just are not ready or do not want kids.

With the overturn of Roe v. Wade, I have been trying to speak out about abortion and

reproductive rights. It should not be a political debate on whether someone deserves the right to an abortion or not. People who are anti-abortion always say, "Adoption is a choice," which is somewhat true. But do you know how many children are in foster care? Do you know how many children are treated poorly when it comes to the system? There are still children who have no choice but to live with the consequences of being in foster care.

I strongly believe that if I was to get pregnant by any of my assaulters, I would have had an abortion and that would be my choice. Not someone else's. I was still a child when it occurred the first time.

People are going to have sex — it is inevitable. Sex is supposed to be fun. You should be able to explore yourself and the things you like without the thought of getting pregnant or impregnating someone else. There should be better access to oral contraceptives, condoms and sex education. Consent needs to be taught, as well as how to communicate during sex.


I want everyone to be heard and understood. Sexual assault is not something easy to talk about or even come to terms with. It takes time, patience, and support. I am grateful to have had my best friends who comforted me and still comfort me when I need them.

As I said, healing is not linear. Your feelings are valid, and so are mine.

You are heard, I stand with you all.

Editor's Note: The columnist is a staffer at The Daily Tar Heel.

Twitter: @dthopinion




bridges between east and west

with poet **Ronny Someck**

In-person event will feature readings by the poet and translations in English.

RONNY SOMECK was born in Baghdad and moved to Israel as a young child. He has published 13 volumes of poetry and his work has been translated into 44 languages.



MONDAY, Oct 24th
5:30 p.m.
UNC Graham Memorial,
Chapel Hill, NC 27599

Bonus: A second opportunity to meet Ronny Someck the next day! Details on our website.

Co-sponsored by: UNC Department of Asian and Middle Eastern Studies, UNC Center for Middle East & Islamic Studies, North Carolina Consortium for Middle East Studies, Duke Asian and Middle Eastern Studies, Duke Jewish Studies.


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THE UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL



Julie Magenheim died at 78 with her children by her side on September 25 in Sarasota, Florida. She is survived by daughter Hannah Searing, son Adam Searing, and three grandchildren, Ava, Skylar and Cameron. Julie lived in Chapel Hill for 20 years where she earned her MSW from UNC-CH. After moving to Florida, she earned her MBA and worked as a non-profit executive. Julie loved to sing, play piano, cook French food, travel with her long-term partner, Bob Garvin (d), and care for Emma, her fluffy Lhasa Apso. A private memorial service will be held at a later date.



DTH AT A glance

The Daily Tar Heel

Everything you need to know delivered right to your inbox every morning!

EDITORIAL

What it's like to get an abortion in North Carolina

Roe v. Wade is overturned. Abortion rights are no longer Constitutionally protected. Say you find that you are pregnant in North Carolina — what happens next?

After finding out you're pregnant, you would first have to consider the political circumstances. Abortion is still legal in North Carolina prior to 20 weeks of conception. Places like Planned Parenthood in Chapel Hill and North Durham Women's Health could both be options for receiving an abortion.

As of Aug. 17, if you are further than 20 weeks along, North Carolina prohibits abortions after a restrictive law from 1973 was reinstated. The only exception to this ban is when a pregnancy substantially threatens the life or health of the mother. If you don't meet the guidelines set by the state nearly 50 years ago, you are not allowed to make a decision about your own health.

One of the first roadblocks eligible patients have to face is the 72-hour waiting period — one of the longest waiting periods in the country. After receiving mandatory counseling, you must wait three days before your abortion appointment.

These waiting periods are not medically necessary, and while they can be used to educate patients on informed consent, they make for numerous visits to the doctor that otherwise would not be needed — all while prolonging the time in which the patient is pregnant when they do not want to be.

Finding rides and arranging these appointments around our already

busy schedules is not an easy task. Aside from finding transportation that coincides with a clinic's availability, the costs of the abortion procedure itself can add up to an already lengthy bill.

Some insurance policies cover abortions, but others might require you to pay out of pocket. Medicaid — a national insurance policy for low-income individuals — is limited in its ability to cover abortions, thanks to the Hyde Amendment. This statute prevents federal Medicaid funds from being used to cover abortion.

Medication abortions, typically consisting of two pills, can cost between \$350 and \$650. In-clinic abortions, by contrast, can cost upwards of \$1,000 within six-to-twelve weeks of gestation.

Some young people may not want to use insurance if they fall under their parents' policy. Additionally, parental consent is required in N.C. for pregnant people under 18 years old, posing yet another obstacle for someone with an unwanted pregnancy.

Finding a clinic that will perform an abortion can be extremely stressful in and of itself. This struggle increases significantly when you live in a rural area.

Currently, N.C. has only 14 abortion clinics. These clinics are centralized around metropolitan areas and spread across only nine out of 100 counties. This leaves a majority of the population without adequate resources in their county, forcing them to travel far distances to the nearest clinic.

Having an unwanted pregnancy already takes a huge toll on one's



Pregnancy tests pictured on Oct. 11, 2022.

DTH PHOTO ILLUSTRATION/SAMANTHA LEWIS

mental well-being. Having to plan, budget and travel several hours within the 20-week limit only amplifies that stress. Some can't afford the time or the cost of travel. There is a massive accessibility gap across the state, and rural areas are hit the hardest.

If you are a transgender man or nonbinary person who can get pregnant, your journey to getting an abortion becomes even more entangled.

It is a bit ironic that the South is home to the highest concentration of transgender individuals, as well

as some of the most restrictive laws on abortion. Finding an abortion clinic that is both accepting and able to provide abortions to more than just cisgender women is next to impossible.

We won't sugarcoat it — we are in a bleak situation. Having an unwanted pregnancy in North Carolina has gotten far more complicated than it should be, and the repercussions could be dire for many people who can become pregnant. The reality is scary, and feelings of unease are valid as we navigate unprecedented times.

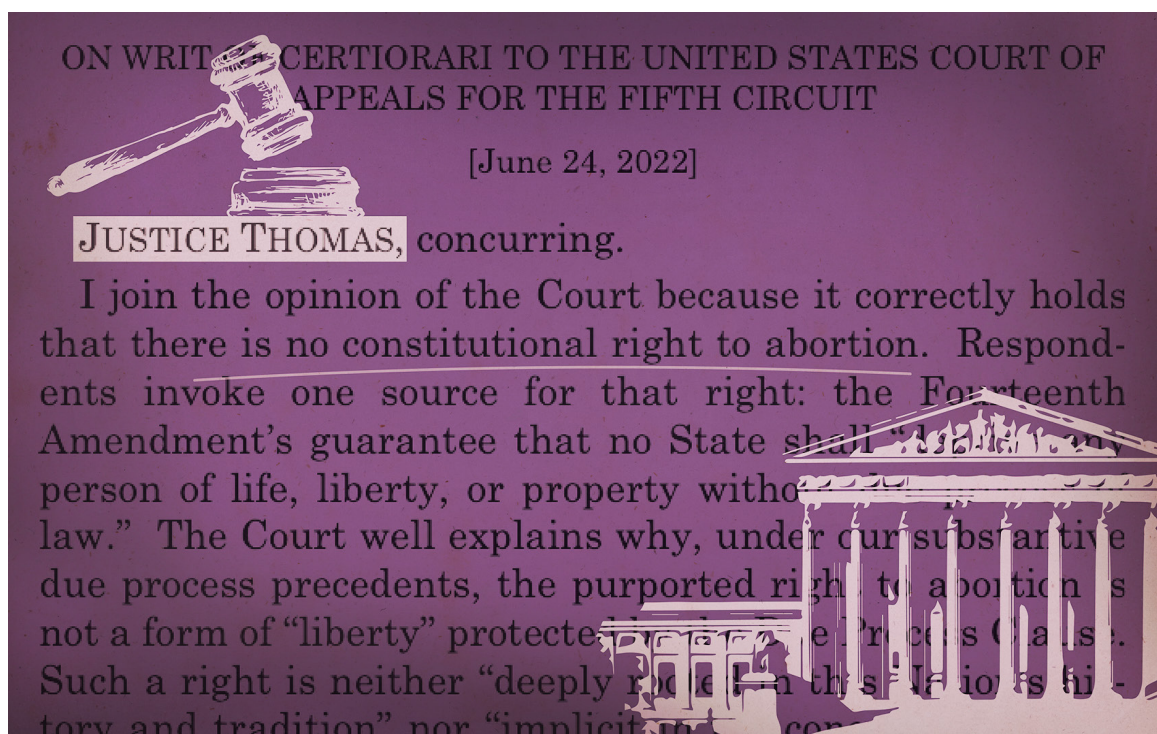
There are mutual aid funds and databases, such as the National Network of Abortion Funds, that provide aid and support for those navigating unwanted pregnancies. They are doing the heavy lifting for abortion rights, where our institutions have failed us.

It's time for our legislative and judicial systems to grapple with this harsh reality that people who can get pregnant face every day in a post-Roe world. We cannot turn a blind eye to the brutal reality of our situation.

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COLUMN

Justice Thomas' dangerous legal precedent



DTH GRAPHIC/GABI ALLEN

His concurrence in Dobbs jeopardizes other important precedents

By Juliana Chiamonte
Columnist

Clarence Thomas has a brilliant legal mind. But I hate the role he plays on the Supreme Court.

While most people are aware Roe v. Wade was overturned in June, I'm assuming that most didn't read Dobbs v. Jackson Women's Health Organization — the case that overturned Roe — in its entirety. I can see why (it's long), but it's really important, especially the case's concurring arguments.

While Chief Justice John Roberts and Justice Brett Kavanaugh both wrote interesting but somewhat unsurprising

concurrences, Justice Clarence Thomas' was gut-wrenching.

He went rogue in his concurrence, calling for a rollback of several fundamental rights, despite the majority's claim that no other precedents were at risk because of the Dobbs decision. Thomas' concurrence has a lot to do with substantive due process as it relates to the due process clause of the 14th Amendment.

The due process clause, which protects life, liberty, and property from being restricted at the hands of the state, is extremely important and commonly referenced. Substantive due process allows courts to prevent government infringement on fundamental rights more generally (stated in the Constitution or not) — a nightmare to Thomas.

In his concurrence, he opens the door to other important precedents

based on substantive due process, using Dobbs as an opportunity to spew selectively-biased opinions.

I'll let Thomas do the talking: "In future cases, we should reconsider all of this Court's substantive due process precedents, including Griswold, Lawrence, and Obergefell. Because any substantive due process decision is 'demonstrably erroneous,' we have a duty to 'correct the error' established in those precedents," he writes.

The cases that Thomas mentions here — Griswold, Lawrence and Obergefell — protect the rights of married couples to purchase contraception, the right to engage in private, consensual sexual acts and the right to same-sex marriage, respectively.

He basically says that, while they're at it, the Court should really double-check the constitutionality of other critical precedents. His

"Everyone's a product of their environment and their lives experiences, but I'm not sure why supposedly-neutral figures stopped trying to hide that fact."

Juliana Chiamonte
Columnist

words suggest that they should be overturned, or at the very least reconsidered, because the Court offered just a little too much protection to vulnerable groups.

Maybe Thomas' opinion is merely a reflection of how dangerous he sees substantive due process to be. On the other hand, it's easy to see how closely his judicial decision-making mirrors his Catholic faith.

As someone who was raised Catholic, I will always believe that a Catholic upbringing — and for Thomas, active practice — challenges neutrality significantly. Thanks, Catholic indoctrination! Gay marriage, abortions and birth control all happen to be generally looked down upon in the Church.

What a shocker.

Legal language is really easy to twist and manipulate with your own bias. That's the whole point of being a good lawyer, right? So at the end of the day, these constitutional phrases are just words, and since Thomas made it to the Supreme Court, he gets a final say on what these words mean.

So, is Thomas really concerned about substantive due process, or does he just not like gay marriage, abortions or birth control and wants to use his position of power to make it illegal to think otherwise?

Everyone's a product of their environment and their lived experiences, but I'm not sure why supposedly-neutral figures stopped trying to hide that fact. The Court's conservative environment right now is breeding overconfident, bold justices, and Thomas, who's been on the

court for over 30 years, really has nothing to lose.

By using his concurrence to go after other important precedents, we get a really good idea of his goals for future cases. While none of us can control our unconscious biases, we can control the parts of ourselves that we know actively affect our decision-making.

Constitutional analysis using substantive due process is the reason we have laws that even come close to protecting the modern American. While I understand the danger of straying too far from the legal comfort of enumerated rights, substantive due process is necessary to offer equal protection in today's political and social landscape.

People with uteruses lost guaranteed access to abortion partly because Clarence Thomas gets to decide which implied rights are valid and which are not.

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SPEAK OUT

Interested in writing a letter to the editor or submitting an op-ed?

- Students: Include your year, major and phone number.
- Faculty/staff: Include your department and phone number.
- Edit: The DTH edits for space, clarity, accuracy and vulgarity. Limit submissions to 500 words.

Email: opinion@dailytarheel.com

COLUMN

Prison system has always preyed on pregnancy

How police and district attorneys enforce abortion bans

By Caitlyn Yaede
Opinion Editor
and Maya Ticku
Columnist

Throughout the years, when reproductive rights were threatened but not yet struck down, we would be momentarily forced to grapple with the possibility of a post-Roe world and what that would look like.

When Justice Ruth Bader Ginsburg died in September 2020 and Justice Amy Coney Barrett was confirmed onto the Supreme Court, a post-Roe country suddenly became close enough to taste. And as we anticipated this inevitable post-Roe society, it invoked images of back-alley abortions and the risks they carry.

But on June 24, our hypothetical post-Roe society was no longer hypothetical. There's no more theorizing about an era without guaranteed legal abortion. We're living it.

The consequences of this legal decision extend further than we can imagine. The imagery of a post-Roe world isn't just back-alley abortions, but invasive surveillance and incarceration. The carceral system has always preyed on pregnant people, and the criminalization of abortion is the newest arm of the already gigantic monster that is mass incarceration.

Abortion is now completely illegal in 13 states, mainly due to trigger bans. 10 of these states do not have exceptions for cases of rape or incest.

And that's not including the 10 states where abortion is legal only for now, as their bans are temporarily blocked.

Without the protection of Roe, abortion can now be considered a crime. With provocative words like "murderer" being used by militant pro-life groups to describe those seeking abortions, the argument that people who receive abortions should be prosecuted — alongside the doctors who perform them — is gaining more traction.

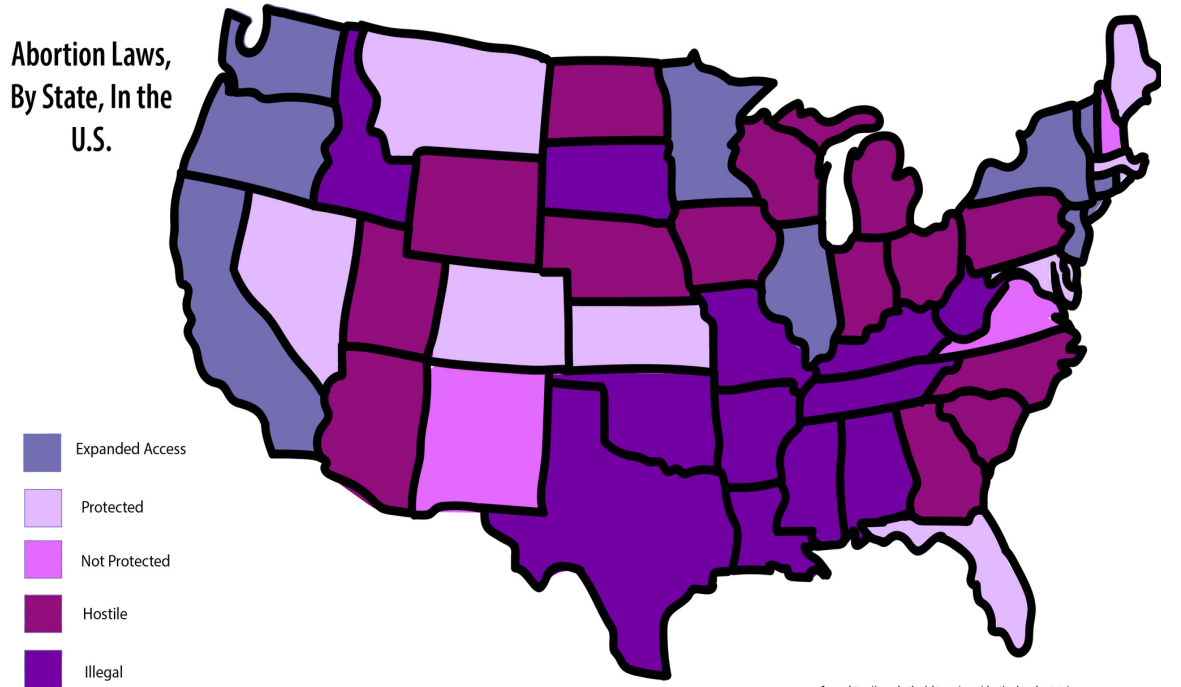
Abortion is becoming an increasingly attractive target for police and prosecutors. Texas State Representative Briscoe Cain, whose seat is up for election in November, said he would introduce legislation to allow district attorneys to prosecute abortion violations even in areas outside their jurisdiction.

Whether or not this is feasible, it proves that pursuing prosecution of people seeking abortions is very much a priority, especially in conservative strongholds.

Of course, even in states where abortion is illegal, there are counties with Democratic district attorneys who have vowed not to pursue prosecution of those seeking abortions. But that kind of protection is on a case-by-case basis, and it's ultimately up to local governments and is subject to change as leadership changes.

The scariest part lies in the fact that the criminalization of pregnant people is not new: The foundation for widespread incarceration of this group of people has existed for years. Between 2006 and 2020, over 1,300 women were arrested for actions taken during their pregnancy, according to a 2021 study by the National Advocates for Pregnant Women.

Abortion Laws, By State, In the U.S.



Source: <https://reproductiverights.org/maps/abortion-laws-by-state/>
DTH GRAPHIC/SAMANTHA LEWIS

Pregnant people have been penalized for miscarriages, stillbirths and pregnancy loss due to existing laws designed to protect fetuses.

In 2017, Latice Fisher was arrested for killing her infant child after losing her 35-week pregnancy. Police searched her phone to see that she had previously researched abortion pills, and this information was later used to prosecute Fisher. Now, as abortion is overtly criminalized in states throughout the country, the door is wide open for similar criminal action against pregnant people.

This relationship between pregnant people and the criminal justice system has existed since

the War on Drugs — an effort in the 1970s by Richard Nixon to reduce drug use that consequently resulted in the mass incarceration of Black Americans. Widespread panic over drug use led to stigma, especially around Black mothers who lost their pregnancies.

Amidst this stigma, 25 states and the District of Columbia require healthcare providers to report suspected drug use among their pregnant patients. And with this discretion entirely up to the predominately white doctors that make up our healthcare system — in a generation raised by unjust stigmas around race and drug use — poor women and women of color are disproportionately targeted.

In 1989, the Medical University of South Carolina drug-tested pregnant women without their consent, resulting in the arrest of 30 women on the grounds of child abuse. All but one were Black.

The bodies of people who can become pregnant have always been policed, and are part of the intricate carceral system that impacts each and every one of us in profound ways. The overturning of Roe v Wade is not just about abortion, but about our rights and autonomy as citizens and our ability to be free from a violent and pervasive police state.

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NOTICE OF ELECTION ORANGE COUNTY, NORTH CAROLINA

The statewide general election will be held on Tuesday, November 8, 2022 in Orange County for qualified voters to vote in Federal, State, and County contests.

Polls will be open from 6:30 am to 7:30 pm on the day of the election, Tuesday, November 8, 2022. Photo ID is not required.

One-stop early voting will be open from Thursday, October 20, 2022 and ends Saturday, November 5, 2022. One-stop early voting will be held:

Sites:

- Orange Works at Hillsborough Commons (in lieu of BOE office): 113 Mayo St, Hillsborough
- Carrboro Town Hall Complex: 108 Bim St, Carrboro
- Chapel Hill Library: 100 Library Dr, Chapel Hill
- Chapel of the Cross: 304 E Franklin St, Chapel Hill
- Efland Ruritan Club: 3009 Forrest Avenue, Efland
- Seymour Senior Center: 2551 Homestead Rd, Chapel Hill

All sites are open the same dates and hours

Dates	Hours
Thursday – Friday, Oct 20 – 21	8 am – 7:30 pm
Saturday, Oct 22	8 am – 3 pm
Sunday, Oct 23	12 pm – 4 pm
Monday – Friday, Oct 24 – 28	8 am – 7:30 pm
Saturday, Oct 29	8 am – 3 pm
Sunday, Oct 30	12 pm – 4 pm
Monday – Friday, Oct 31 – Nov 4	8 am – 7:30 pm
Saturday, Nov 5	8 am – 3 pm

Absentee ballots will be mailed to voters who have requested them beginning September 9, 2022. A voter can fill out an absentee ballot request at votebymail.ncsbe.gov, or by filling out a request form provided by the board of elections. The request must be received through the website or by the Orange County Board of Elections by 5 p.m. November 1, 2022.

The Board will hold absentee meetings at 5pm on Oct 4, Oct 11, Oct 18, Oct 25, Nov 1, and Nov 7, 2022. The Board will begin the absentee count at 2 pm on Nov 8, 2022. A pre-canvass and supplemental absentee meeting will be held at 5pm on Nov 17, 2022. Canvass will be held at 11 am on Nov 18, 2022. All meetings will be held at the Orange County Board of Elections office at 208 S. Cameron St, Hillsborough.

In the general election, voters will select candidates for U.S. Senate, U.S. House of Representatives, N.C. General Assembly, state and local judges, district attorney, and county offices.

Voters voting in person are entitled to assistance by an election official, or, if assistance is needed due to disability or illiteracy, by a qualified person of their choice. Voting sites are accessible to all voters. Curbside voting is available for voters who are not able to enter voting sites.

All persons who live in Orange County Board of Elections may vote in this election. Persons who are not already registered to vote in the county must register by 5 pm Friday, October 14, 2022 to vote in this election. Voters who are not registered in the county by that deadline may still register and vote during one-stop early voting only and will be required to provide documentation of their residence.

Persons with questions about election matters may call the Orange County Board of Elections Office at 919-245-2350. Text us! Many questions can be answered 24/7 by texting 919-246-8773.

Please be advised of the following precinct change:

The Lion's Club precinct has been merged with the surrounding Carrboro, Owasa, and Town Hall precincts in 2021.

Please be advised of the following Election Day voting location changes:

Hillsborough North: formerly known as Cameron Park (same location since Nov 2020)	Orange County Middle School Auditorium 308 Orange High School Rd, Hillsborough, NC 27278
Cedar Falls: (same location since Nov 2021)	East Chapel Hill High School 500 Weaver Dairy Rd, Chapel Hill, NC 27514
Glenwood: (same location since Nov 2021)	Rashkis Elementary School 601 Meadowmont Ln, Chapel Hill, NC 27917
Town Hall: (same location since Nov 2021)	Town Hall Complex (behind Town Hall) 108 Bim St, Carrboro, NC 27510
Eastside: (same location since Nov 2020)	Ephesus Elementary School 1495 Ephesus Church Rd, Chapel Hill, NC 27517
Hogan Farms: (same location since Nov 2020)	Morris Grove Elementary School 215 Eubanks Rd, Chapel Hill, NC 27516
Weaver Dairy: (same location since Nov 2020)	Seymour Senior Center 2551 Homestead Rd Chapel Hill, NC 27516

ORANGE COUNTY BOARD OF ELECTIONS

Now featuring Breaking News Alerts

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80% OF AMERICANS SUPPORT SAFE, LEGAL ABORTION.

Anti-abortion lawmakers are rolling back reproductive rights across the country. The courts are supposed to protect us, so why aren't they?

