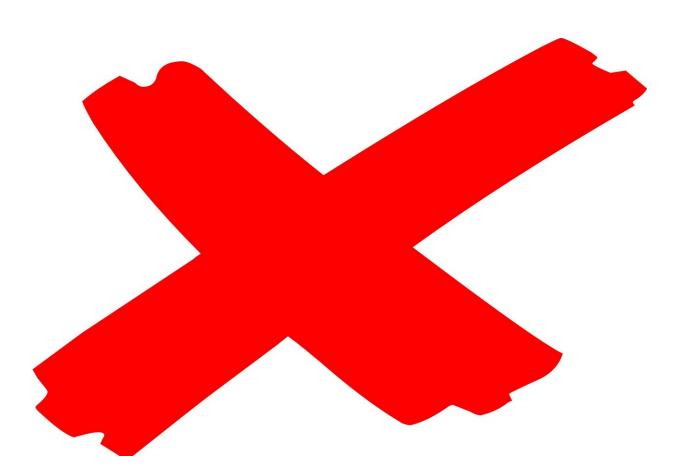


Limits on early abortion drive more women to get them later

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Christina Taylor already had two kids when she became pregnant with her third. Everything was going well at the start and she was looking forward to welcoming a new baby into the family.



Then, when she was 20 weeks pregnant, Taylor went for an ultrasound and basic anatomy scan.

It was the worst news. The baby didn't have kidneys or a a bladder, and there was no amniotic fluid. The baby would likely not survive the pregnancy, or would die shortly after birth.

"I had the option to wait it out and see when he passed and then, you know, you'd have a stillbirth. But I knew I couldn't do that," Taylor said.

Fortunately, in Colorado, abortion is legal, with no gestational limits. Taylor went ahead with what is medically considered a later abortion.

Abortions later in pregnancy are rare, even more so now with the availability of medications to terminate early pregnancies.

Across large parts of the United States, they are increasingly difficult to obtain.

Many states have laws that require a waiting period before an abortion, or an ultrasound. If the U.S. Supreme Court overturns its 1973 Roe v. Wade decision that legalized abortion, women will face even more hurdles in some parts of the country, and may have to travel to another state get an abortion.

That means more women could end up having the procedure later than they wish.

"It's not because people don't want to have them sooner," said Dr. Diane Horvath, an OB-GYN in Baltimore, Maryland, who has performed abortions for 16 years. "It's because barriers and new information cause them to have to push it back to later in pregnancy."



Nearly 93% of legal abortions performed in the U.S. in 2019, the most recent data available, occurred within the first 13 weeks of pregnancy, or in the first trimester, according to the Centers for Disease Control and Prevention. Just over 6% were performed at 14 to 20 weeks' gestation, and even fewer, less than 1%, were performed at 21 weeks or later, in the third trimester.

For some women, delays in finding out they are pregnant are the first hurdle.

"Everyone thinks you present pregnancies the same way. You miss a period, you throw up, you take a test and at five weeks, you know you're pregnant. And that is just not how life shakes out for a lot of people," said Erika Christensen, founder of PatientForward, a nonprofit that helps people access later abortions.

Jenn Chalifoux, now 30 and studying law at the University of Colorado in Boulder, became pregnant in 2010, when she was 18 years old and receiving inpatient care for an eating disorder in New York.

She'd been missing her period, but that's a common symptom for those dealing with a restrictive eating disorder. Also, she was on birth control.

By the time she took a pregnancy test and reached out to Planned Parenthood, she was told that it was too late for a medical abortion and she would need a surgical procedure.

After going for an initial appointment at a hospital to prepare for the procedure, another ultrasound revealed that she was further along than first thought. In all, Chalifoux said it took about a month from the time she learned she was pregnant until she was able to receive an abortion, a few days after she turned 19.



As Chalifoux discovered, the cost of an abortion increases significantly as time goes on, from a few hundred dollars to thousands in the second trimester and even tens of thousands later on.

A young woman who was raped in 2020 said she didn't find out she was pregnant until months later saw the cost of her abortion increase substantially over the weeks it took to find out she was too late to get services in Houston, where she lived.

She was in her third trimester by the time she got on an airplane, alone, to fly to New Mexico and terminate her pregnancy at 27 weeks of gestation.

The woman, whom the AP isn't identifying because she's the victim of a sexual assault, was helped by PatientForward, the non-profit abortion rights group.

For these women and others who find themselves seeking later abortions, the reasons are as varied as they are with earlier abortions, and often out of the women's control.

"It's really hard to get an abortion in this country," Christensen said. "And the idea that people are able to seek care by a certain date is kind of based on the myths that we get all the information we need by a certain time and that we live in equitable environments with equal access to resources and health care. Neither of those are true."

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