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Reproductive Rights Glossary

2021

Cobalt strives to destigmatize abortion access by creating a more inclusive conversation about the issue. For that reason, we use the terms “pregnant woman” and “pregnant person” interchangeably within this guide because abortion care may be sought out by anyone with a uterus, including nonbinary, genderqueer, and trans folks.

20 Week / 22 Week / etc. Ban

Legislation that bans abortions after 20, 22, etc. weeks of gestation. There is no medical reason for such a ban, and they have been consistently found by the courts to be unconstitutional.

Abortion

Termination of a pregnancy. The vast majority of elective abortions (more than 90%) in the US happen in the first three months. First trimester abortion can be done either by using medication or as a quick procedure in a clinic, and legal abortion is one of the safest medical procedures in the country. Colonoscopies, laser eye surgery, and carrying a pregnancy to term are exponentially more medically risky than abortion.

One in four American women will have an abortion in their lifetime. Two-thirds of women who seek abortion care already have children. Colorado was the first state to allow safe, legal abortion – it did so on a bipartisan basis in 1967, after the Supreme Court’s *Griswold v. Connecticut* decision (1965) establishing the Constitutional right to privacy, but before the *Roe v. Wade* decision (1973) establishing the right to abortion. According to the American College of Obstetricians and Gynecologists, “Safe, legal abortion is a necessary component of women’s health care.”

Abortion Provider

A medical provider, such as an Ob-Gyn, Family Medicine doctor, midwife, or nurse practitioner, certified to conduct abortions. To find a provider go to www.INeedAnA.com

“Abortion Reversal”

Anti-abortion activists have used the term “abortion reversal” to refer to the unproven (and potentially dangerous) hypothesis that progesterone administered after use of mifepristone can stop or interrupt the medication abortion process. There is no reputable scientific research to back up this claim and the studies conducted to try and prove it have been ended early out of concerns for the health of the participants. The American College of Obstetricians and Gynecologists (ACOG) says it is “not supported by the body of scientific evidence” and is “not recommended.” The term is only used here to provide context and guidance.

“Access” to Abortion

A phrase referring to a pregnant person’s actual ability to receive an abortion. The right to an abortion is a Constitutional Right under the 14th Amendment according to the ruling in *Roe v. Wade*, however, many patients face barriers to actually accessing abortion care including cost, distance to the health care provider, speaking a different language, being able to take time off from work/school, finding childcare, etc.

ACOG

Founded in 1951, The American College of Obstetricians and Gynecologists (ACOG) is the nation’s most widely recognized and respected medical professional membership organization dedicated to the improvement of women’s health. Its companion organization The American Congress of Obstetricians and Gynecologists focuses on socioeconomic, political, and grievance activities for its members.

“Advanced maternal age”

The term used by doctors to describe a pregnancy that occurred in someone over the age of 35. Doctors previously deemed these pregnancies “geriatric,” but have since forgone using this term.

Birth Control/Contraception

Contraception prevents pregnancy. Birth control is not abortion; abortion is the termination of an existing pregnancy. Contraceptives include the birth control implant, patch, pills, shot, sponge, vaginal ring, cervical cap, condom, diaphragm, female condom, intrauterine device (IUD), morning-after pill, spermicide, tubal sterilization, and vasectomy.

“Born Alive” Abortion

This is a political propaganda term, not a medical one. It has no relevance in actual medical practice, and only serves to stigmatize abortion care.

Co-Pay

The Affordable Care Act requires health plans to cover certain preventative health services, including prescription birth control, as a basic benefit. That means that most women who use prescription birth control will get it with no co-pay – that is, direct out-of-pocket cost – at the pharmacy.

Ectopic Pregnancy

A life-threatening pregnancy that develops outside the uterus, often in a fallopian tube (tubal pregnancy). Ectopic pregnancies are extremely dangerous and can be fatal to the pregnant person if not treated by a medical professional.

Elective Abortion vs. Spontaneous Abortion

An elective abortion is the interruption of a pregnancy at the pregnant person’s request for reasons other than concerns about the health of the pregnancy. A spontaneous abortion – also referred to as a miscarriage – is any pregnancy that is not viable (the fetus cannot survive) or in which the fetus is born before the 20th week of pregnancy. Spontaneous abortion occurs in at least 15-20% of all recognized pregnancies and usually takes place before the 13th week of pregnancy.

Emergency Contraception

Also known as the “morning after pill” or “Plan B,” emergency contraception prevents pregnancy up to five days after sex. It is available over the counter in Colorado and is usually included in most rape kits in emergency rooms. Note: emergency contraception should NOT be confused with the abortion medication RU-486. These are two entirely different drugs.

“Fake Clinic” / “Crisis Pregnancy Center” / Anti-abortion Counseling Center

An anti-abortion organization that operates and bills itself as a full spectrum pregnancy care medical office. Anti-abortion counseling centers provide prenatal support and offer counseling from an anti-abortion perspective – with the goal of dissuading pregnant people from getting an abortion. These facilities do not offer abortion care.

“Geriatric Pregnancy”

An outdated term previously used to describe a pregnancy that occurred in someone over the age of 35. Today, however, for obvious reasons, doctors do not use the aforementioned phrase and instead use the term “advanced maternal age” to describe these pregnancies.

Griswold v. Connecticut

Decided in 1965, the Supreme Court’s decision in *Griswold v. Connecticut* established a Constitutional right to privacy for married couples and protected the right to use birth control. It laid the foundation for the *Roe v. Wade* decision in 1973.

Guttmacher Institute

Founded in 1968, The Guttmacher Institute is a leading research and policy organization committed to advancing sexual and reproductive health and rights in the United States and globally. The Institute produces a wide range of scientific research, policy analysis and communications resources on topics pertaining to sexual and reproductive health, including the public policy journal [Guttmacher Policy Review](#).

“Heartbeat Bills”

These bills are abortion bans. They include phrases like “fetal heartbeat” designed to justify banning abortion as early in pregnancy as possible, often before someone even knows they’re pregnant. The American College of Obstetricians and Gynecologists called these bills “arbitrary” bans not reflective of fetal development or science.

Helms Act

AKA the Helms Amendment to the Foreign Assistance Act, is a 1973 amendment, passed by the U.S. Congress in the wake of the *Roe v. Wade* decision by the United States Supreme Court, to limit the use of US foreign assistance for abortion.

Hyde Amendment

The Hyde Amendment, first introduced by Henry Hyde in 1976, prevents the use of federal funds, most notably Medicaid funding, to cover abortions except in cases of rape, incest, or life endangerment of the pregnant person.

When politicians deny coverage for abortion, people are either forced to carry an unwanted pregnancy to term or pay for care out of their own pocket. This may mean they forgo necessities like food, rent, or utilities to come up with the funds and push themselves deeper into poverty.

The Hyde Amendment creates an often insurmountable barrier to care and is particularly harmful to people with low incomes, people of color, young people and immigrants – who all disproportionately rely on Medicaid for their health care coverage.

Implant

Along with IUDs, a form of Long Acting Reversible Contraception. Implants consist of a very small rod inserted under the skin of a woman’s upper arm to provide birth control. It’s invisible and prevents pregnancy for up to 4 years with an effectiveness rate of 99%.

Intrauterine Device (IUD)

A device inserted into the uterus to prevent pregnancy. It is among the most effective birth control methods, with an effectiveness rate of around 99%. IUDs can prevent pregnancy for anywhere from 3-12 years. Because IUDs are default protection, the American Academy of Pediatrics recommends them for teenagers. However, although highly effective, IUDs are also among the most expensive forms of birth control up front, starting at about \$500 if not covered by insurance, which creates a barrier to accessing this method of birth control.

LARC

Long-Acting Reversible Contraception (LARC) are “set it and forget it” forms of contraception (usually IUDs and implants) that are highly effective, can last for years, and require no further action on the patient’s part once administered. The methods are reversible and patients can become pregnant once the IUD or implant is removed.

“Late-Term Abortion”

A medically inaccurate, inflammatory propaganda term used to describe an abortion later in pregnancy.

Medication/Medical Abortion

A first-trimester abortion option using medication that terminates an existing pregnancy. Medication abortions are FDA-approved as safe and effective for pregnancy termination. The medication protocol is two-step: mifepristone, which is taken in combination with misoprostol. A medication abortion is NOT the same as emergency contraception.

Miscarriage

Often referred to as a “spontaneous abortion” in medical notations, a miscarriage is any pregnancy that is not viable (the fetus cannot survive) or in which the fetus is born before the 20th week of pregnancy. Spontaneous abortion occurs in at least 15–20% of all recognized pregnancies and usually takes place before the 13th week of pregnancy.

Parental Notification / Involvement

Parental notification laws – such as the one in place in Colorado – require that a parent or guardian be notified if a minor under 18 attempts to obtain an abortion. Parental involvement mandates that the parent or guardian be aware of the abortion, although the parent does not need to provide consent.

Ideally, a young person facing an unintended pregnancy could go to their parent or guardian for support but that isn’t always possible for a variety of reasons. No law can force healthy family communication or relationships. Young people should have the autonomy and agency to make the decisions that are best for them and their futures. The exception to this is if the pregnancy is a result of rape or abuse. A minor can also seek a judicial bypass to get permission from a judge to go through with the procedure without parental notification or involvement.

“Partial Birth Abortion”

This is a political propaganda term, not a medical one, invented by abortion opponents in the 1990s. It has no relevance in actual medical practice.

Perinatal Hospice

AKA “Perinatal Palliative Care”: Coordinated medical treatment for both the mother and a newborn in the event that the newborn has a life-limiting condition. This medical treatment has a dual focus on ameliorating suffering and honoring patient values. Perinatal hospice does not replace access to abortion care because it still requires a person to continue a pregnancy until the time of delivery.

“Personhood”

Also known as the idea of “life at conception.” Giving legal rights – or “personhood” to a fertilized egg, even before pregnancy begins. It would ban all abortions (including for ectopic pregnancies) and many forms of birth control. The passage of “personhood” has the potential to trigger investigations into miscarriages.

“Pregnant Person”

A gender-inclusive way to refer to anyone with the ability to get pregnant. While public discourse frequently classifies abortion access as a “women’s rights” issue; folks who identify as nonbinary or transmale can also find themselves in need of abortion care.

“Protecting Human Life at Conception” Bill

AKA “Personhood”: This bill is a staple in the CO GOP’s annual legislative agenda. The bill would outlaw nearly all abortion procedures in the state. This exact bill concept has been introduced 8 times in the past 8 years – voted down in committee each time.

Reproductive Health

The direct servicing of an individual’s reproductive needs by a medical professional.

Reproductive Justice

An organizing framework developed by women of color that looks at intersecting areas of oppression. The principles of reproductive justice include the ability: (1) to decide when to become a parent, (2) to decide to not become a parent and (3) to raise their children in a safe and healthy environment. Reproductive justice incorporates a broad range of issues within the conversation surrounding reproductive rights. To learn more about Reproductive Justice, [visit SisterSong’s overview.](#)

Reproductive Rights

The individual legal rights to reproductive health care services with a focus on protecting and expanding abortion access, standardizing sex education, and increasing access to family planning services.

Roe v. Wade

The 1973 U.S. Supreme Court ruling establishing a Constitutional right to an abortion under the 14th Amendment. Abortion was legal in a handful of states before *Roe* – including Colorado – but not legal in most of the country. *Roe* established that women have a Constitutional right to choose abortion no matter where they live and that states cannot interfere with that right without a “compelling state interest to do so.” *Roe* laid the groundwork for other significant abortion rights cases like *Planned Parenthood v. Casey*, *Whole Women’s Health v. Hellerstedt*, and *June Medical Services v. Russo*.

Sonogram

A picture of the fetus in the uterus produced by the visualizing technology called ultrasonography. First trimester sonograms may require the use of an ultrasound wand inserted in the vagina to establish the age of the fetus. Mandatory sonogram/ultrasound laws are used to attempt to shame patients out of having an abortion.

Surgical Abortion

This is a surgical procedure to end a pregnancy, also called dilation and curettage or D&C. In this procedure, a small straw is passed through the cervix into the uterus to physically remove the pregnancy. Surgical abortion in the first trimester is very safe and very common. Later in pregnancy, surgical abortion typically requires referral to an Ob-Gyn specialist and can be more complicated and more expensive.

TRAP Law

TRAP Laws (Targeted Regulation of Abortion Providers) are burdensome and medically unnecessary laws that are designed to shut down abortion clinics and have nothing to do with patient health or safety. Examples of TRAP laws include: mandating the size of janitor closets, having hospital admitting privileges, air temperature requirements, and mandating the size of procedure rooms. These laws have no basis in patient health or safety and have one goal in mind: to close abortion clinics. Roughly 90% of American counties have no abortion provider and TRAP Laws further restrict access to abortion care by forcing clinics to close.

State Funding Ban in CO

The Constitutional Amendment in Colorado that prevents the use of public funds, most notably Medicaid funding, from coverage of abortion care except in cases of rape, incest, or life endangerment of the pregnant person. Akin to the Hyde Amendment (federal budgetary restriction), CO’s State Funding Ban creates an often insurmountable barrier to care and is particularly harmful to people with low incomes, people of color, young people and immigrants – who all disproportionately rely on Medicaid for their health care coverage.