

This interview has been lightly edited for clarity.

AMELIA BONOW:

Hello, everybody. My name is Amelia Bonow. I use she/her pronouns and I'm the executive director of Shout Your Abortion. Shout Your Abortion is a nationwide organization working to normalize abortion and elevate paths to access regardless of legality. We make resources, campaigns, and media intended to arm existing activists, create new ones, and foster collective participation in abortion access all over the country.

So we're here today for Abortion Academy. Each of these monthly webinars are presented by one of our exceptionally brilliant colleagues whose work we want to introduce to our larger SYA community.

We hope that Abortion Academy will deepen your knowledge, propel your curiosity, help you connect some of the dots between issues you are navigating regionally and what's happening at the national and international level and ultimately to give you fresh ideas to take back into your community.

Audience members will be off camera and muted for security, but we will have a format for you to ask questions throughout the presentation, which our speaker, Lupita, will probably begin answering after about 20 to 30 minutes of a presentation. And then we'll chat and we're excited to take your questions.

Lupita Sanchez is a dedicated community organizer with over a decade of experience organizing alongside rural and migrant communities through progressive youth advocacy and mutual aid initiatives. Her background in trauma-informed care and crisis support has been instrumental in her work as a healthline director. She is devoted to ensuring BIPOC, Queer, and trans individuals have access to sacred abortion care.

Lupita volunteered her time as an abortion doula up until November 2022 when they were hired as one of repro's health line co-directors and continues to provide compassionate support to those seeking reproductive health care.

Reprocare is a reproductive justice organization that seeks to holistically support access to abortion care and one of the ways that they do this is by operating a peer support helpline. And Lupita is going to be talking to us about the peer support model and how it works and how it differs from a medical hotline model.

And one of the reasons why we're so excited to hear from Lupita today is that the peer support model closely resembles a lot of what we've been talking about, organizationally and in these abortion academies recently such as the accompaniment model. And you know, there's a lot of overlap with what Lupita will talk about today with community networks, which we heard about last month at Abortion Academy, and ultimately these are models that really excite us because we are really excited about learning to take care of ourselves and each other.

And the peer support model is about harm reduction and people staying safe outside of the system and ultimately, it is a model that can help neutralize some of the financial, logistical, and cultural barriers to abortion access, which we know are always showing up in ways that are racist and classist and fundamentally unacceptable.

We're so excited to have Lupita here with us and I'm just gonna hand it over to them.

LUPITA SANCHEZ:

Thank you, Amelia.

Hi, everybody. My name is Lupita. I'm one of the co-director's for the Reprocare hotline and I'm so excited to be here. I'm going to share my screen, give a presentation about who we are, what we offer, what information we offer, and then open questions at the end.

So, a little bit about the Reprocare healthline. As you already heard, we're a phone and text line offering peer-based support and information for anyone having an abortion at home with pills. We have been active since 2019. Morgan and Phoebe in 2019 met up and said, "hey, let's make this happen."

And then a few months later they're like, "Hey, Lupita, do you want to be part of this project?"

And I said "sure". And here we are. And so this started around 2019, and we've been active ever since then.

This is just an example of one of our flyers, and I'm also open to sending those out as well as stickers to anyone who would be interested in getting those.

But yeah, we offer information. Our expertise is in self-managed abortion support so there's people managing their own abortion at home, but we also offer compassionate anonymous support to people just going through the navigation process of going to get an abortion.

What we offer: we are open seven days a week, in both English and Spanish. The only time that we're closed is maybe for a week and some days during the holidays. We're open from 9am to 5pm Pacific Time. We're always available and will respond to any calls and text messages within at least an hour.

For those who do end up calling us, the call goes through to a voice message where people can share a little bit more information about what they're looking for and whether or not the number is a safe number to call or text. You know, important information and then we'll go ahead and return that call or text them back.

We support people navigating where to find pills, and we share resources such as Aid Access, Plan C, Las Libres, Abuzz, and a whole other array of resources and avenues.

We also offer accurate medical information on how to take the medication, what to expect, answering questions about symptoms like: What's normal? What's not normal? We have people asking questions like: "I'm not bleeding and I took this many pills" and "when should I take more?" or "I'm bleeding too much. Should I be concerned and go to the ER?" or "How do I even take this medication to begin with?" or "I'm in pain and how do I best manage my pain?"

We're very open to just meeting people where they're at, even if someone doesn't want to take any medication. We offer other holistic resources and information on how someone can help mitigate their pain.

We just want to make sure that the caller is feeling listened to, really heard and supported by us, and we really pride ourselves on that.

Along with that, we also offer support to people throughout the entire process. We offer emotional support. Whether it's someone calling and they're in the middle of their abortion or it's something that they're thinking about and they're unsure about, you know, the emotions that are coming up and they just want someone to talk to that they don't know. They want to feel like they can really express themselves and sometimes, calling a stranger can help navigate those emotions. And so we offer that support as well, even supporting people after the fact and offer emotional support, as well for that.

We've spoken to clinic defenders who are just having lots of emotions come up about everything that they're going through and so we'll speak to them, as well. We'll speak to parents. We'll speak to partners and family members and friends. We've spoken to partners calling us and saying, "hey, I have no idea what my partner is going through, but I want to make sure that I can support them and I don't feel like I can ask them right now. So can you share some information on how I can help my partner out?" and we'll have those conversations with them. And sometimes we'll get a call back from them, and they'll want to talk about their own experiences being in a relationship with someone going through an abortion. So we're here to offer all kinds of emotional support to anyone who needs it regarding abortion access.

We also offer robust holistic referrals, specifically SMA inclusive options, and counseling. Sometimes, people will call us and they won't know what they necessarily want to do or what choice they want to go with so we'll offer a listening ear, and lots of validation. We have a lot of people struggling with religious trauma or just you know, struggling with guilt. And so we support people navigating through those emotions.

We also offer practical support funding. This is something that we recently started implementing this year and so, if someone is traveling to a banned state and they would appreciate some money to go towards gas or maybe they're missing work and some extra cash would help. Maybe they're taking their family with them and they need access to a hotel room and we can offer funding for that, as well. Someone might be managing their abortion at home and they

need some money to get pain medication or heating pads at their local pharmacy. And we'd be more than happy to support people and offer that kind of funding as well.

And we recently started our care package support and it's coming soon so we haven't actually sent them yet. We're currently in the process.

But if we have anyone calling us who is planning to have an abortion, they'll go on the phone and say, "hey I'm thinking about ordering pills where can I order them?" We can share that information. Or "Hey, I'm concerned about just the legal repercussions." We can also share some information and resources for that.

And then if they're like, "okay, I ordered my pills. They should be coming in the next week or so" and then we would then go ahead and send the care package their way so then they would have access to teas, pads, heating pads, and some sweets. Something to make them feel less alone.

For some people, this experience can be a little isolating so we want to make sure that they feel supported and seen and validated. And this is just another way of us doing that for them.

All of our support is virtual and remote. Like I mentioned earlier, we are available via phone or text or on Signal. The same phone number that we share publicly is the same number that we have connected to our Signal. So we're also available on Signal for those who are just trying to be extra cautious around specific security concerns. We usually try to push for Signal, but we can be texted through regular text as well.

We're a highly public available resource. We have had people find us online. We've had young people contact us because they found us on TikTok or Instagram. Just a general online search on Google. And we make sure to support people in all 50 states and also people outside of the country.

We have a lot of access to resources and we can help people anywhere. There hasn't been a place where we've gotten a call and we haven't been able to get people access to pills. Not yet.

We are also open to being referred by institutions who are not comfortable counseling people on self managed abortion directly. As you know, there's a lot of concerns around criminalization whether it's for someone seeking the services or offering and providing abortion services directly.

And so we are available to providers who don't feel comfortable. They'll share our information and we'll get a phone call from someone saying, "hey, I went to this clinic and they said to call you" and then we will share any kind of information or resources that they're looking for. And also word of mouth.

Right now, I'm the only Spanish speaker on our hotline, but we are currently onboarding three other people who also speak Spanish. So I won't be the only one answering the Spanish calls.

But a beautiful thing, I think, about Latin American communities is that they're really huge on word of mouth and most of our resources or most of our phone calls and texts who are Spanish speakers come from word of mouth. People just sharing this as a resource or "hey my friend told me to call you, can you share more information about what you offer?" I think that's a beautiful thing that we're able to offer that support to people.

And when I mean navigation support, I mean we will do everything and anything to make someone feel empowered, educated, and well informed to make the best decision for themselves.

And so I'll be on a phone call and someone might have a local resource that they're not aware of, but then the main line can be a little difficult or scary or daunting to help navigate and I will literally be on the phone with someone, especially, you know, people who are new to the country are maybe not necessarily comfortable navigating. And so, I will say you call this number it's gonna beep and you're gonna press 2 and then it's gonna beep again and you're gonna say this information is what they're looking for and then they should call you back. And so we'll do everything to support people through the entire process.

What exactly is the importance of peer support? According to safe study, self-managed medication abortion with supportive and accompaniment groups is safe and effective and non-inferior to clinical care before nine weeks.

And that's something that we really like to uplift is that anyone can be an abortion doula, even if you have a friend who has an appointment and you're like, "hey, I can go with you and wait in the waiting room with you as you wait to get to the back for your appointment if you want." That is the work of an abortion doula. And I know people get a little funny about titles but if you're someone who's supporting someone else through an abortion, whether that's financially offering, sending a text that says, "hey, I'm thinking of you. I know your appointment is today. Let me know if I can support you or drive you to your appointment." Or if it's after their appointment and they're home and you door dash them some soup. That's peer to peer support and that's something that an abortion doula does.

And so anyone can support someone going through an abortion. There are trainings for people who are interested in becoming an abortion doula. I did see that question in the chat earlier.

There's a great resource called the [birth workers of color](#) and they can be found online. They have a huge Instagram and social media presence, and they offer abortion doula training online and those are accessible to anyone. And if you're in Southern California, they have in person trainings as well, if that's something that you're interested in.

Networks exist across the US, but are necessarily not publicly known. Word of mouth is a huge resource such as sharing resources with your friends, with your family, with anyone who's just interested. You can share our resourceS, and then you're already doing the work by just sharing our number to people.

And yeah, we're always open to receiving volunteers, as well. And we're always opening our onboarding process to people who want to be a volunteer with us.

Some benefits of peer support: compassionate and centered on all callers' autonomy. I think the big difference between peer support and receiving support through some kind of clinic or medical or a provider is just that we tend to have the time and capacity to offer that kind of support.

I know that a lot of our medical providers and just general abortion providers can sometimes be at capacity and we understand that. And so we are here to support people, and meet them where they're at. We offer compassionate support and offer space for them to express and really ask for what they need. Sometimes people don't even know what they need and they just need someone to kind of, you know, talk to them and it comes up within that conversation.

Comprehensive patient navigation: As I mentioned earlier, we offer information and resources for people whether it's questions around criminalization, whether it's questions around medical support, medical information, or just general "what's in my community?"

A lot of our volunteers and our staff are involved in all things reproductive justice and we're spread out throughout the entire US and beyond. And so we offer information and resources to people who might prefer in-person support. We also have people on our hotline and access to people and ourselves. We are also, at least the health line staff and volunteers are, doulas who do this work in person and in our own communities. We want to make sure that people know that we're an available resource in our own communities and we want to make sure that people know that we're an available resource to them and you who are watching this can also be a resource to your own community. It's a lot more accessible than most people think.

And we're also resilient to changes in the landscape as you've seen, due to our ever changing political climate. Things change and sometimes people can provide the resources and information and education that they would like to. And as the health line and the system that we have in place, we're able to offer all information and support and resources. No matter what happens politically, we're gonna be here and we're gonna offer that support.

Some callers choosing to self-manage don't want to interact with any medical institutions or doctors. And so I think that's also something really important to share that just because someone is managing their abortion at home doesn't mean it's the end all, be all like "I've tried all my other options. I don't have the money. I can't travel. I have a family. I don't have access to transportation. It's just too much and I don't have a choice but to have an abortion at home and manage it on my own." That's not the case for everyone. Some people would prefer not to go to a medical institution or go to their doctor or clinic to have an abortion.

Sometimes people feel a lot safer with a friend or a hotline or an abortion doula in their community to support them through the process. And one very popular resource again online

are abortion showers and, you know, that's on Instagram. An Instagram page where people celebrate their abortions and many people experience this process together. And I think that's really beautiful because it helps to destigmatize abortion and abortion access in general, as a whole.

Generally, we get about 10 to 15 calls a day. This is an example of one of the messages a lot of people want to give us a review or reading somewhere. We don't have a Yelp profile but you know, we ask them if we can share this image or a screenshot of the kind of interaction during our presentations and that's the one way that they offered to help us out. We provide alternatives to where institutions and where callers could be criminalized, help callers and navigate those institutions more safely. And also offer compassionate support and accurate information to help people have safe abortions, no matter their situation.

I'd also like to add that we help a lot of houseless people, as well. And sex workers and a variety and diverse community of people that we offer support to. We try our best to offer support to resources and information too, and we're really proud of that.

How can you offer peer support? Know paths to access in abortion. There you go. If you learn, you know, even just knowing the very popular well known and wonderful resources like PlanCPills.org. Knowing that that's a resource that you can share with someone who is interested in ordering pills is already a really great way that you can offer support to people in your community.

Also offering support and information to friends and family on how you can make an appointment at a clinic, and then get it paid for through a fund or an insurance. Sometimes you can get it covered for insurance for the most part. And even just letting your community know that you are a safe person to come to. I think that's really important to share and you can do that in many ways. You can share a lot of information on your social media, Instagram stories about abortion and they're like, "oh, this person knows and they obviously don't judge anyone having an abortion or freely share information or talk about their own abortion or abortion access, or share posts about the political climate around abortion access. And I know that this person is a safe person that I can go to and talk to and really feel like they're hearing me out and not feel judged."

You can practice non judgemental, compassionate, and emotional support. Listening and affirming are a lot more important than you think. Especially as someone who's been doing this work for a minute now. Sometimes people call us very distraught, of course, and confused and scared. And then all they had to do was express how they were feeling and all we had to say is "you're not a horrible person and you have the right. You deserve the access to this kind of care and we support you in your bodily autonomy." And that's all sometimes people need to hear and they're like, "got it, thank you. I know. I feel confident in my choice now." Or ordering the pills now or taking the medication as we speak, you know.

And so it's a lot more powerful than you think. Taking a SASS training or an abortion doula training to learn more details. As I mentioned, birth workers of color are a great resource to get that abortion doula training. And the SASS training specifically shares information on what to expect if you're managing an abortion at home and to physically support the person having an abortion, whether that's what type of tea or medication or movement or information does this person need in order to help manage their abortion.

And then learn general security practices. As I mentioned earlier, getting on Signal, using an encrypted email address. We use proton mail. And, making sure that you're not posting too much about your abortion if you don't want people to know about it, on your social media.

Okay, I think that's the end. I'm gonna stop presenting for now. Open to questions.

AB:

Yay, thank you so much, Lupita. That was amazing. You just made it look so easy.

Yeah, my immediate takeaway is just like there is so much- I've kind of been like going off about this in my Instagram lately-there's like so much just like panic and fearmongering coming out of the political establishment, and from mainstream repro orgs and it's like all of our inboxes are just full of people that are just like "everything is totally fucked and we alone can fix it" and you're just like "yeah we can do this. In fact we are doing it and we're helping people in this enormous range of ways and you can do it, too."

Just how you set this up, these are all things that we can and should do, regardless of what's happening politically. Like obviously, we would be living in a better world if this ethos was more mainstreamed even if Dobbs had not happened, you know?

And I-

My first question for you was going to be like that not everyone is a health line volunteer, obviously but like what can the average person do?

But then you had {said} to just sort of show up for abortion in their community and you have that perfect slide that was just like, yes, this is the list.

LS:

Yeah.

AB:

My first question then since you answered that one so beautifully already and I would love to-

Like, if we could put that list somehow, and I just want to keep that list. And send it out maybe to our folks on our email afterwards or something. But I wanted to ask you, who is supporting you? Because I know that you are holding so much not just from abortion seekers, but you're

offering yourself as a support to movement folks in such a general way, and I'm sure that you are all holding a whole lot.

And I wonder if you have like organizationally or interpersonally some stuff developed to help you all like to hold that weight.

LS:

That's a great question. As for the health line as a whole, we have access to a therapist that we see once a month and it's open to anyone, whether it's for people who work for Reprocare or volunteers and it's an opportunity for people to go over calls that they, you know, have that might have been a little tough. Or just have general concerns around the political climate and they want to express their frustrations.

Our therapist, Kathy, was also an abortion doula, and so they have a deeper understanding of what we're experiencing and the conversations that we're having. And they're also a licensed therapist so it's just a beautiful combination, and we're able to get that support from them. Phoebe and I have been on the health line since 2019 and so we're each other's support system as well.

We're on Signal 24/7. And so we're able to, I don't know, just offer that support off of and bounce off of each other. And that's really helpful. And I think everyone is also involved, not just in Reprocare, but in other projects, as well. And so it really kind of helps balance the load that we're taking on.

We also tend to be really conscious of the time and energy that we take from our volunteers or we ask from our volunteers. I think asking for volunteer work can be a little tricky when you know, obviously, volunteers have their own life outside of volunteering and so we try our best to offer stipends.

We are very flexible with their schedules. Most of the time, each person takes six hours a week to volunteer and if they can't, we're okay with that. We take on that extra time or someone else will pop in like, "hey, I know that you've been putting a lot of time. I don't mind covering the shift." We've put a lot of effort and time and energy to make sure that our volunteers feel safe, they feel comfortable, and that they don't feel like we're pressuring them to take on more than they can.

They have families, some of them, and obviously, lives outside of volunteering. And so, I think that's also a huge part of feeling supported or managing their capacity. Just making sure that our volunteers feel heard and can take time off if they want to take time off. And we do the same thing at Reprocare. Our staff is very understanding. Our admin is very understanding.

And if I need to take time off? They're not gonna say no because they know that the work that we're doing is really important and we're always available. So yeah, I think just general support systems coming from different little pockets. It's helpful.

AB:

Yeah, I'm so glad that sounds-

Yeah, sounds like a very intentional set of systems that you have built to take care of each other.

Do you have times- you said that you and Phoebe are always on signal. Do you have times that you're like, I'm not gonna look at my phone for abortion stuff right now? Like, do you have windows that you're like, I'm off?

Cause I'm asking because it's really hard for me to do that. And I'm sure that most of our movement peers feel the same way.

LS:

Yeah, that's a great question. It wasn't until this year actually, in April, that Phoebe and I-

so we were both on from 9 to 9, seven days a week and it wasn't until this year, the beginning of this year that we brought up just this radical idea of maybe one of us taking one day off on the weekend and then the other one taking the other day off. We started implementing that this year. So they have a-

AB:

(laughs)

That radical six day work week. Yeah.

LS:

(laughs)

Yeah, now we have only six days and I'm still available and seeing the signal messages but not responding all the time. And it can be difficult, but I think we've set up a system where we're just so passionate and dedicated.

That's probably where you're coming from, as well.

AB:

Yeah, totally. Yeah. Yeah. I was just gonna say that too, like I can sense that from you, and I feel the same way that there is a huge difference between people who feel like they cannot stop either because of something coming from within them that's telling them they have to like work that much or that they're afraid that if they don't help people that no one else will be able to but there-I think you know it's like I've done other kind of support work before this. And there is sometimes, I think, a sort of, almost an addiction to this kind of work that can happen that can be really difficult to see your way out of, you know, and I think that what I get from you, though is you love to do this and it's what you want to be doing.

And I think that that's really different. And it's really beautiful and like it's really beautiful that you have found and helped create this thing that is full of people who feel the same way. And it's such a cool model. It's such a cool model. It's just like-

It's just the world I wanna live in, you know, and it's so... it's so not gate kept is my favorite thing about it. It's antithetical to that. And I, yeah. I wanted to ask you how you feel like Reprocare has been influenced by international models and movements?

LS:

Yeah, we take the accompaniment model, a huge influence is acompañamiento in Latin America and Mexico. And so, I think it's really important to highlight that the accompanying model here in the US would not exist if it weren't for them creating it in other countries.

And so we take a lot of influence from those models. And so as I mentioned earlier, Las Libres is a huge inspiration and we do offer them as a resource to a lot of people who call us. And for those who aren't familiar with [Las Libres](#), they offer free pills delivered to people's homes-

AB:

Yeah, free abortion pills worldwide! Free abortion.

LS:

And so yeah, they're a huge resource, a very popular one that we share. And their model of accompaniment is a huge influence on how we do the work that we do.

And I think it's a great reflection on the passion that people in other countries have to support their communities. And not everyone has access to medical support and information and resources and instead of accepting it, these people were like, let's do something about it. Let's be a resource where we don't depend on these institutions and we can support each other 'til the end of time. And yeah so, I think that's where we take our influence and it's just again, like no matter what happens politically, we want to be able to continue offering support and being a sustainable resource to people who are seeing that information.

AB:

It's like such a testament to their feminist practice that like these Latin American collectives have decided to be so generous with this knowledge, and with their literal material support to US activists.

Like I think we would be living in such a different world right now if that had not happened. You know what I mean?

Like with Las Libres being the most obvious example. But from what I have always heard like the folks in Argentina and around the accompaniment model, it's like this is meant to be shared and they have been seeing the shit coming for us, and proactively trying to show us the way and thank God.

I wanted to ask you about if there is such a thing as an average SMA call, like some of the most like sort of common threads that you hear from callers. And I wanted to tie it to a very hot button thing that's happened in the movement in the last couple weeks, which was this Washington Post article came out and it's about people self managing abortions and, without getting all the way into like the problems that I think many people had with the tone and much of the framing of the piece, this one part really stood out to me, which was where the journalist was like-

She said basically like, you know, this all this stuff is happening. It's like all of these anecdotes, many of which are framed and I think, in a sort of intentionally ghastly way. She's like the research is showing activists say that doing this is safe, but people in red states often don't feel that way and to me, that makes me want to change that and help people to feel safer and help people to understand that accessing pills through sources like community networks is safe and help people to understand that the risk of prosecution is relatively very low and that the risk of medical complication is very low.

And that like it just-

It felt like a clear call to confront that fear with truth and support and bringing people into, you know, a space like Reprocare is the best possible way to do that.

So I guess I'm wondering-how often do you encounter callers who are just really scared? And like what are their primary fears?

LS:

I think, with what you just shared, it's important to highlight that a lot of the fear comes through lack of education. And so a lot of people don't have the background or understanding of how safe these pills are, or how you don't need a medical provider, or to be around someone with a license to go through this process.

And yeah, I think a lot of it has to do with a lack of education. We do get a lot of calls from Florida and Texas to the point where we'll be speaking with really young callers who need just general sexual education on how their body works, and they're not receiving that education in school. And so we're more than happy to help young callers navigate that. But I think that a lot of the fear is from lack of information. And also just the fear mongering that's going on, politically.

And so, I think once people... you know, so people do call us who are scared and concerned about maybe criminalization, even just because there's so many different laws in each state like how would you expect someone to help, you know?

AB:

Oh my god. Oh, it's like we don't even understand... like movement people don't even understand.

LS:

Right.

AB:

And in part because they're like making this shit up, you know, it's like because laws aren't real. Like no one's just tested it yet.

LS:

Right, exactly. And so I was just gonna say that we can barely keep up with what's going on.

AB:

Yeah.

LS:

And so it's like lack of information, fear mongering, and lack of sexual education. And so that's usually where we kind of take a step back and really meet these people where they're at and ask them questions. We don't tell people what to do. We don't share information that people don't ask for, and we are really good about taking a pause and allowing them to express themselves and to the point where they eventually get to their own answer.

AB:

Yes, yes.

LS:

And so, a lot of the time, that's how we navigate those calls. People are like: is this illegal? Or like: how likely is it for me to get criminalized? And so we'll just share resources.

AB:

I was gonna say do you attempt to answer those questions or do you just direct them to the Repro legal helpline?

LS:

We direct them to the Repro legal helpline and we also share best practices on how to navigate that. So for a lot of people who do end up being criminalized, it's due to someone really close to them and so asking questions like, do you feel safe?, Is this a safe number to continue talking to you?, you know, and just asking those questions, helping them navigate their own concerns and then also sharing the Repro legal helpline.

AB:

Do you have a sense of how callers are learning about SMA? Obviously abortion pills have gone from being almost culturally unknown like five years ago or something.

I would say five years ago, probably 9 out of 10 people thought it was Plan B. And now it's like I think...I think that probably we're approaching a cultural saturation point where like, if someone has an unintended pregnancy, they maybe have a notion on average that that's a possibility.

LS:

I think a lot of people are finding out through social media, which is huge. So that's where a lot of people, especially young people, get their news and, as we've seen, it's been a really powerful resource for a lot of people.

AB:

Yeah.

LS:

That's why social media like TikTok is being banned, and you know the reasons why.

It's just...it's really active information that is easily accessible and shared. And also shared in a way where it's easy for people to understand and feel safe.

It's also kind of like a review that people are receiving from other people who go through the process.

AB:

Yeah. Yeah.

LS:

And so they'll be like-

I've seen videos of people like, come take my pills with me today. And it's like a "get ready with me" kind of thing. And so I think normalizing it also has helped.

AB:

Yeah.

LS:

That's a huge thing and there's just a lot of us out there really talking about it. I think SYA is a huge resource. Plan C Pills is a huge resource and just sharing each other as a resource and also connecting behind the scenes like we have a lot of Signal chats with M and A, [if/when/how](#) in the back end and just like how can we like share this information and make sure that people feel safe and comfortable, you know, navigating it.

AB:

Yeah, totally. I love just how much you are not coming from a place of fear like your vibe is just so not fear-based. And I think that's so important when you're trying, like from my last question, when we're trying to make people not be scared of something that we're standing here saying is

safe. I feel like that doesn't come through sometimes in movement speak, and I just love how empowering your sort of natural stance is here.

LS:

Thank you. I think it comes from my background and mutual aid work. And so a lot of my background personally is like community organizing.

AB:

Yeah, yeah.

LS:

And so you can be a community organizer and not be approachable, or you can make it feel like anyone can get involved.

AB:

Yeah.

LS:

And it's, I mean, I like to see reproductive justice and abortion access as similar to mutual aid work, maybe just with a larger scope.

But yeah, and that's the goal for us at Reprocare is to make sure that people feel like they can do this on their own, and our goal is to just for us to be not needed.

AB:

Yeah, totally. Yeah.

LS:

Like we don't want to be a resource that people have to share because they have some in their own communities, and they don't need to call it and they feel supported.

AB:

Yeah. Yes. Yep. Yeah.

LS:

And so that's why I present the way that I do because you know, everyone listening can do it. You don't need to be a nonprofit. You can be just like a mutual aid group in your community, and one person and offer support.

AB:

Yeah. Yeah, 100%. I want to encourage folks to ask questions of Lupita since I'm just sitting here blabbing. But we can chat for a few more minutes. I wanted to ask about tricky calls.

And one thing I wanted to know because it's like when we're talking about security, we're not just like talking about the security of the people that we're helping, but like our own security and obviously, if you're not comfortable answering any of this, just keep it moving, but I'm wondering if you ever have felt like there's an anti trying to call you.

And I assume that you have sort of the same protocol regardless. Like they can't bust you because you're gonna-

It's like maybe they're an anti. Maybe they're pregnant too. I'll still share the same shit with them. But I guess I'm wondering how much you think about getting fucked with by the opposition.

LS:

We actually hardly get any anti calls or texts from people. I think the first one we got was literally yesterday. Someone was like, you are all going to hell. And we're just like, okay, we can block this number. And that's like-

But the training that we do with our volunteers. We train our volunteers in a way that it doesn't matter who contacts us, and if someone is sneaky, we'll still share the information.

AB:

Yeah, you, you can't-

LS:

It's publicly available. It's publicly available information that anyone can access and we're just sharing it.

AB:

Right, right. Erin's wondering if there has been an increase in calls over the past couple of years.

LS:

Yes, yeah, definitely.

AB:

And do you notice that like-

Is it specifically like-

The SBA was a huge thing, I'm assuming, and then Dobbs and then Florida and Arizona. Do you see bursts with each one of these things?

LS:

Yeah. Especially with Dobbs, a huge influx in calls and text messages. And each time a new law is passed or, you know, there's a ban enacted, we get an increase of calls and text messages.

So, yeah, happy to be there as a resource. And a huge influx of calls and texts, but nothing that we can't manage so far. We've been able to manage an increase in calls and text messages.

AB:

So you have two of the same questions in the chat, which is how does someone volunteer for Reprocare?

LS:

Great question. And so one of the ways that you can volunteer is that we have cycles of our volunteer onboarding and we usually post about it on our social media, and you can follow us. I think it's ReproCare Health Line on social media, and on Instagram. So we'll post about it there, and we open up an application. There's an application process, an interview process, that we go through just to make sure people who are applying aren't antis. But yeah, we open it up. Right now, we're about to finish our latest onboarding. And we'll probably open it up again in a few months.

AB:

Awesome. There's another question in the chat that is how do you manage clients who are unable to have a medication abortion?

LS:

We share resources. So it depends on if they're unable to have a medical abortion. My question to that question is why? Is it because of access? Is it because of work? Are they unable to take time off of work? Is it because of childcare? Or maybe they don't want to and they want to go to a clinic and we also offer resources for how to make an appointment at a clinic and how to get their abortion funded.

AB:

Awesome. What is your go-to resource if someone is asking about using pills later in pregnancy?

We at SYA, we don't ever want to talk about pills in a way that implies that they are only safe and effective early in pregnancy. We know that that's not true, and that they're used throughout pregnancy all over the world. We also know that we are not the authorities in taking pills later in pregnancy and that that's like a whole other...it requires different levels of support. And that we just want to be open to talking about it, and know where the best resources to point people are.

And so I'm wondering what sort of how you respond when a caller is asking you about a later pregnancy.

LS:

Yeah. With later pregnancies we tend to be a little bit more extra intentional on how we communicate with them. We tend to lean more onto the emotional side, and emotional support. And we also offer information and dual support for people who are after 12 weeks pregnant so

we can be a resource for that as well. We offer that support at least up to 23 weeks. And then if someone is further along, we share Las Libres as a resource as well.

AB:

Awesome. So Las Libres. Is they're dual support still primarily via text message?

LS:

Yes, the resource that we share is a phone number so primarily through text message, unless someone speaks Spanish and then they can call.

AB:

And yeah, gotcha. That's what I thought. Thank you so much for all of that. This has been really so, so cool. This is such a beautiful, important project. I just love the lack of scarcity that you are just embodying here, and just the can-do attitude of a seasoned community organizer that's just like, we can do this. We're out here doing it all the time and we're never going to stop.

And I think that-

Yeah, it's just...it's gives me-

My shoulders relax every time I talk to somebody who is like putting that out into the world. And yeah, we can do it. That's the bottom line. There's one more question that is for the practical support piece. What is your timeline?

For example, there have been times when I've worked with a client needing gas money to get to an out of state appointment last minute.

LS:

Yeah, so we tell them that we will cash app them within 24 hours. And so I think the beautiful thing about being a smaller resource and not like a giant abortion fund is that we are able to get to people a lot faster than other larger abortion funds. And so a lot of the time, we'll get people calling us even after we sent them their money just continuing to ask for help because they're like, "I've called. And 1, 2, 3, you know, all these other abortion funds and we're not getting a call back."

AB:

Oh, wow.

LS:

"-and you're the one answering our calls and we know that you already sent us money but what do we do now like can you send us more money or like you know how do I navigate this?" Dnd so, yeah we give that money in at least 24 hours.

AB:

I mean, yeah, that's really another amazing thing about being like a small, scrappy mutual aid oriented fund or organization is like "we'll just cash app you in the next day", you know?

LS:

Yeah, and specifically, the help line because there are branches to our organization, but the health line is very intentional to make sure that it stays scrappy and small.

AB:

Yeah, totally. Yeah. And like, I think, you know, it's like the idea is we just continue teaching other people to do all this shit and then there's no such thing as experts. We're just all doing it.

LS:

Yeah, that's the goal.

AB:

I wanna end with just-

If you can share, and before I say this, so: two orders of business.

One is there is a raffle for Abortion Academy attendees for-

Wait, how do we do it, Erin? I forget.

I think that if you're here, you're entered to win a fabulous prize but I kind of-

EJ:

You're automatically entered, but we want to do it off camera just not to give people's emails away if they don't want that, but I will email you if you win and you will win a prize.

AB:

Yeah, so the point being, we are bribing you to attend Abortion Academy with fabulous prizes and you are all now participating in that. I also wanted to mention that SYA is about to start fundraising.

We just yesterday launched a fundraising campaign called Give Big, which is a Washington State day of statewide nonprofit giving. It's May 7th and 8th and yeah, Michelle will put the link to our page in the chat.

We are really excited about our next year of programming and helping spread the word about organizations like Reprocare. Like we see ourselves as, you know, a microphone that is trying to help activists and would be activists all over the country to understand how abortion access works these days and how to help people navigate that with support and how to know who the real ones like Reprocare are out there, how to get plugged in, how to support, and just like how

to understand the landscape. And yeah, we would be grateful for anybody's support, whether that's in the form of a donation or like sharing that link. So we can continue to blast the good work of others. And the last thing I wanted to ask you is just like, What are some of the feedback you hear from callers who are telling you like the way that your support has meant to them or how they feel their experience is different than it may have been otherwise.

LS:

A lot of the time people are not used to having conversations with people who don't straightaway go into fix it mode. And so, I think a lot of the feedback that we get is just that we offer the opportunity for people to just express themselves and be upset and angry and sad.

AB:

Yeah, yeah.

LS:

And not feel like we want it to stop and you know, we just-

You know, it's like okay you stop being sad I'm sorry no, like it's okay, and we understand how complex it all can feel.

AB:

Yeah.

LS:

And so that's one of the biggest things. We'll be on the phone with people for over an hour. It's just them trying to make sense of their situation and wanting to feel validated.

AB:

Totally. And like what a gift in this like gross ass capitalism where you just feel like you're getting run through appointments, and your doctor doesn't even look you in the eye to just be able to have space to express yourself. It's got to be just like the first time that a lot of people have, like you said, experienced that dynamic.

And yeah, in the words of my friend, Dr. Monica McIlmore, this could all be different. We could do all these things differently. And yeah, it makes me think about when I worked at a crisis clinic here in Seattle and there was like so much-

People have so much anxiety about what to say to someone who's in a really tough spot who's in a crisis, and I always come back to like, it's like just listen, you know? Really you can do so much and like what you said about help, like someone will usually kind of talk themselves through stuff and just with minimal support and reflection and affirmation. You know, like people know what they want and need to do in these situations, and often they're just looking for a non-judgmental, affirming mirror to just be with them.

And yeah, I'm just so incredibly grateful for you all. This has been a really beautiful session. We appreciate you so much. Is there anything else you wanted to share with folks?

LS:

No. Thank you so much. I think it's really important to divert from the scarcity mindset and fear based decision making. We're out here sharing the information. You can call if you want any resources or information or just to talk to someone.

AB:

Yay! Perfect. Thank you, Lupita. We appreciate you.

Thank you so much everybody for being here. We'll see you in May when we will have the Prairie Fund talking, which is North Dakota's abortion fund, talking about an amazing book club that they've started and they're going to be talking about rural organizing and cultural organizing in small towns and it's going to be amazing.

So please join us on the last Thursday of May, whatever that date is. And yeah, thank you all so much.