

Amelia Bonow:

All right, let's get started. Hi everybody. Thank you for joining us. Oops, I'm getting weird popups here. Hi everybody, and welcome to Abortion Academy. My name is Amelia Bonow. I use she/her pronouns, and I'm the executive director of Shout Your Abortion, which is a nationwide organization working to elevate paths to access regardless of legality. Did I say... Oh, we're a nationwide organization working to normalize abortion. I almost didn't say abortion in the first sentence, which wouldn't be very us.

SYA makes resources, campaigns, and media intended to arm existing activists, create new ones, and foster collective participation in abortion access all over the country. And Abortion Academy is our monthly webinar series, where we are joined by one of our brilliant colleagues and we take a deeper dive into their area of expertise. These sessions are for anybody who is looking to deepen their knowledge, connect dots between issues happening at the regional, national, and international levels, or just get some fresh ideas to take back into your community.

Audience members will be off camera and muted for security reasons, but you will be able to ask questions in the chat throughout the session. And Imani is going to be talking to us for maybe 45 minutes, and then I will pop back in for some Q&A. We also have live Spanish translation available. So if you go down to the bar at the bottom of your Zoom screen and you click on the globe, you can select the language you'd like to listen in.

So we are joined today by Imani Askew-Shabazz, and Imani is from Plan C, who... If you're watching this, you know Plan C, I would think. Plan C is turning 10 this year, this summer. And in the last 10 years, it is not at all hyperbolic to say that Plan C has completely transformed access to abortion in the United States and the way that we understand it, the way that we think about it, the way that we talk about it, all by just bringing into public consciousness this incredible reality that is abortion pills by mail, and just abortion pills used outside of medical context, I would say, and self-managed abortion.

This idea that abortion does not need to occur within the confines of a clinic. It does not need to be done alongside or with assistance from a doctor or medical provider in order to be safe, in order to be effective. That there are ways to have abortions where we're supporting ourselves and each other with help from grassroots organizations and not feeling like we have to go do this in a medical establishment. So Imani, who has been with Plan C for a minute now, how long? Five years?

Imani Askew-Shabazz:

Oh, actually, I want to say this is my sixth year.

Amelia Bonow:

Amazing. Imani is a visionary reproductive justice scholar, activist, and educator who has been doing research and advocacy on pills and SMA that is reshaping how we understand and

demand care, equity, and bodily autonomy for those most marginalized by existing systems. Dr. Askew-Shabazz brings both rigorous academic grounding and fearless community commitment to her work. And as partnerships and engagement director at Plan C, Imani translates that vision into direct action, forging community partnerships that expand awareness of and access to abortion pills across the country.

So we're going to be hearing from Imani about some of the history of Plan C, what Plan C is up to, and how you can get involved both with the organization and just in pushing forward the work of making pills by mail more understood and widely just making sure that your community knows that this is an option. And we're also going to hear about what Plan C is imagining for the future. And so with that, I will hand it over to Imani.

Imani Askew-Shabazz:

Hi everyone. Okay. I'm going to pull up these slides real quick. Perfect. I love it when it works automatically.

So, as Amelia said, it is Plan C's 10th anniversary, and this is really exciting. But before I get into all of that good stuff, after such a wonderful intro, there is not that much else I need to say. I know that my name on here is different than the name on here. Both are my name. I just got married not too long ago, and sometimes the names are just different in different places and that's okay. But I am Imani Askew-Shabazz, and I'm the director of partnerships and engagement at Plan C. I use she/they pronouns.

And like Amelia and I were just talking about, I've been at Plan C for about six years now. I actually started as an intern, and it was my first foray into the abortion space. Before that, I was still working in sexual and reproductive health, but I was more in the sex education side of things, and I was in the midst of being in school for public health. And I actually just finished with my PhD in public health, and so now I finally get to say I'm Dr. Askew-Shabazz and that has been crazy. I've been in school for so long. It is so fun to finally not have to be in school anymore and to have all this free time that I never have experienced in my adult life, but I digress.

I am so excited to be here and to talk about Plan C's history and some of our big programs. And what we're going to be talking about today is just an intro to Plan C, although I know you all are likely already familiar. So I'm going to keep it cute, keep it brief, and then go into a little bit of a brief history of Plan C and some of our key moments, some of our projects that I want to share with you all, and I hope you will want to get involved in after this, and then just a little bit of looking forward. Okay.

So Plan C is a nonprofit, research-based website that houses a comprehensive state-by-state pill guide with information on abortion pill access by mail nationwide. And our vision is a near future where abortion pills by mail, which is a very safe and effective method, is in the hands of anyone that seeks it, and really moving agency over abortion back to the individual. And I know

Amelia in the introduction was talking about how we really want to demedicalize the abortion experience and process, and part of that demedicalization is wanting these pills to be able to be used by people in the comfort of their own homes or wherever it is they feel most comfortable. And that is something that we really try to center in the work that we do at Plan C and have that vision centered in all the programs and things that we do.

So most people know Plan C for our Guide to Pills, but we also do so much more, and this is what people don't always know. So there are four major ways that we take up space in the abortion ecosystem. And the first one is conducting research and publicly sharing that information about how people are accessing abortion pills in the US, whether it's through domestic providers or international providers, and just sharing the global evidence about the safety and efficacy of medication abortion. And so of course the guide is where a lot of that research goes, but also we are involved in things like researching how to make the process of abortion pills by mail easier for people, more accessible to people, how people need support in those moments and support models, how to best set up practices for telehealth abortion services. And so there's really a whole research wing of Plan C that exists in the background.

And the second thing is building collaborative relationships, and that's with providers, reproductive health justice organizations, technology innovators, grassroots organizations, really anyone who shares the vision of a demedicalized abortion pill by mail process. And this is a huge way in which we work with other people. It's also my bread and butter at Plan C, so I'm a little biased when I talk about partnerships and engagement because I spend all day talking to just the most amazing people who really share this vision of making sure that people are able to access the care that they need. And over the time that I've been doing this, I've been able to meet the most amazing people, including the Shout Your Abortion team, who we love dearly. And it just makes it so much easier to share the weight of doing this work really, and seeing the ways in which people get so creative about sharing this information, making sure that people are able to access the care that they need is always so inspiring.

Thirdly, we also call for universal access to abortion pills, and specifically destigmatizing and normalizing the self-managed abortion. And so partially we want people to have access to it, but part of getting access to it is also feeling comfortable accessing it. And so that's really where the work to destigmatize and normalize comes from. And lastly, we center the transformative nature of abortion pills, and builds upon decades of their safe self-use, and that's really to move agency over abortion back to the individuals who seek them. And again, that is the core of what we do at Plan C, is just making sure that we are keeping that vision in mind and always moving in a direction that will help to free the abortion pill if you will.

And so now, this is a new section for me, so I hope you all enjoy it. This is going to be a brief history of Plan C. And I spent a long time trying to make a cute little timeline, so here we go.

So, these are going to be some of the key dates in Plan C's history, and we're actually going to start in 2015. Imagine, transport yourself back to the year of 2015. This is before the beginning

of Plan C. Elisa Wells and Francine Coeytaux, who are two of our four co-founders, were preparing an analysis for the Reproductive Health Technologies Project about how lessons learned from their time and bringing emergency contraception over the counter could be used to spread awareness of abortion pills as a self-managed method in the United States.

So for those who don't know, Francine and Elisa are heavy hitters in the reproductive health space, and before their time at Plan C, they were part of the team that helped to bring emergency contraception over the counter. So, before you have to have a prescription and all of that stuff, but now it's all on the shelves, and they were part of the team that made that happen. So super, super cool. Definitely sheroes. And I was so excited when I came to Plan C originally as an intern and was hearing all the lore about our leadership and how they just did such really, really cool things.

And so in these years, Francine and Elisa were also working internationally and witnessing the expansion of access to abortion pills through pharmacies in many countries and the positive impact that that was having on reducing maternal mortality. And they were like, "Oh my gosh, this is amazing. How can we make this happen in the US?" And that led to the year 2016, which was the official year that the website launched. And 2016 was an interesting year as well, because this was the first year that the... Well, this was the first year that Trump was elected. And in the months before Trump took his first term, so that fall of 2016, we launched a one-page website at plancpills.org to answer the questions: what are abortion pills, and how are people finding them online and using them to safely self-manage an abortion?

And so then in the summer of 2016, Plan C launched the website to share that information. And in late 2016, we noticed that online vendors were selling abortion kits, or sometimes they're also called MTP kits. And we researched and tested these vendors and then published all that research in the *Contraception* journal as well as on our website, what was originally called the Plan C Report Card, and this was documenting what we knew to be reliable online sources of pills. And so before there was a whole guide, there was the Plan C Report Card, and it was only one page, and it was a very bare bones website, but we wanted to get that information out there.

And at the time, we were also told that we would be shut down when the new administration took office, but that did not happen. And instead, over time, we actually kept growing and kept researching and building out the website, and that led us to the year 2017. And this was really an interesting time because we partnered with a group called Gynuity to publish the first peer reviewed research on online pill vendors serving the US, and this was research on groups that were internationally based that were serving people within the US. So, this was really when the international model of abortion pills was taking shape and growing exponentially. And so, that peer-reviewed article got a lot of press and launched national awareness of pills by mail in the way that we're starting to see it now. And this was a really, really exciting time at Plan C to be able to just have all those years of research come to fruition in this article.

And so then there was 2020, and this was the year that really changed it all. And I titled this Redefining or Reexamining Abortion Access During the Pandemic. So we know that COVID shut down in-person access to abortion, and when that happened, Plan C actually put out a call to providers urging them to mail abortion pills during the public health emergency. And this really was based on updated guidelines from the World Health Organization that were saying that you really didn't need a pregnancy test in order for a self-managed abortion to be a safe and effective option.

And so, as early as March of 2020, some providers started mailing pills. And a judge's ruling in July, which was the ruling that took away the in-person dispensing requirement for mifepristone, it really opened the door for telehealth services to begin. And so, clinics and telehealth startups fast tracked the adoption of this kind of new telehealth self-managed abortion option, and that reduced the needs for things like blood tests and physical exams, and the world of telehealth abortion care and online abortion care really opened up and skyrocketed.

And in August of 2020, there was another ruling that opened the door for mail order pharmacies to ship pills. And so we started working with online pharmacies who were open to shipping abortion pills to people. And as all of this was going on, we were like, "Okay, we're asking providers to do a lot, and what can we do to make this easier and more supportive for them?" And so we partnered with the University of Washington to develop a provider toolkit to assist providers who were interested in starting up telehealth abortion practices or integrating telehealth abortion services into their existing practices, and to help that be an easier process. And 2020 was also the first year that our website grew to have over a million visits per year, which was huge for us. We were so small, and we were just figuring it out, and then, all of a sudden, it was like being discovered overnight, and it was a really chaotic but also a really inspiring time for our small team.

And over the next couple of years, the website continued to grow, and then we reached 2022, and 2022 was the infamous Dobbs decision, when Roe v. Wade was overturned, and Plan C again sprung into action to do just what we've always done, which was to share information on sources of pills and supporting and normalizing self-managed care, which clearly was going to be more important now than ever now that the federal right to abortion had been rescinded.

And soon after Roe was overturned, we began supporting the passage and implementation of shield laws, which protected telehealth providers as they mailed pills into banned states. And shield laws really grew to be a pillar of the online abortion ecosystem and really changed the game in how we were able to get people in banned states access to the care that they need in a timely manner. At the same time, community networks also came online, and they really had the goal of mailing pills for free to people in restricted states and offering accompaniment and peer support, and that became a really big feature of the Plan C website during this time.

And so from 2023 to now, we really still focused on continuing the research and the fight for abortion pill access. And ever since Dobbs, we have been heavily engaged in researching and supporting ways to improve self-managed abortion access nationwide, and this will continue to be what we do until it is either no longer needed or we get shut down by powers to be that are larger than us. But until then, we're going to keep rocking and rolling. We have had an amazing history of innovation and collaboration, and we hope to continue that into the future.

And just really quickly, because I know that this was huge in the past couple of weeks, what about the most recent FDA case? And this most recent attack attempting to severely restrict mifepristone definitely caused chaos and fear among abortion seekers, advocates, providers alike, and that was really the goal. But what's important to know is that access to mifepristone and misoprostol remains intact, and Plan C is committed to ensuring that our guide stays up to date with information on how folks are accessing abortion pills by mail. And we know that that ecosystem also includes US licensed clinicians, in addition to robust alternative distribution networks, which have grown and strengthened across the US over the past decade. And so we feel very confident that regardless of what happens in the courts here, we will be able to have access to mifepristone for years to come.

Okay. So that was a little bit about our history, and now I want to turn focus and talk about some of the projects at Plan C that are core to what we do, and that I feel like you all might want to get involved in.

So starting off strong, the one that you all probably know the most about is the Plan C Guide to Pills. And Plan C is really the only organization to publish a state-by-state directory of at-home mailed abortion pill options, and we have them in three big categories. The first are US-based online clinics. So these are domestically based or US-based clinics that prescribe and mail pills with medical support included. The second category are international online clinics. So these are clinics outside the US that prescribe and mail pills and also provide medical support. And then finally, we have websites that sell pills, and these are just websites that will sell pills and they don't offer any additional support, but these are the three big categories of providers that we list on the guide.

And while we don't focus particularly on in-person abortion on the guide, we do link out to groups like I Need An A, who have really, really great directories of in-person abortion clinic options as well. So if people do come to our site and they are looking for that information, they will be linked out to one of those other really great directories.

And so a question that we get asked a lot is what makes the Plan C Guide to Pills so special? And of course, the big one is that we have options for abortion pills by mail in every zip code. We are really proud to be able to have collective research on how people are accessing this option in all 50 states and also the US territories. And more than that, we're also proud to have research-backed listings with up-to-date information. And so a lot of people don't know this about the Plan C Guide, but we do really research the providers that are listed on the guide. We

have a really extensive mystery shopping program so that we're able to verify things like ship time and pricing, and if they offer financial assistance at different providers, things like that. And we are so indebted and grateful to our mystery shoppers who help us make sure that the providers that we list are providing the best care to people.

And we also occasionally will do independent lab testing to ensure that the medications that are coming from these providers are the medications that they say that they are. And this is particularly when it comes to sites that sell pills, because those tend to be the ones that people are the most concerned about, although they are perfectly safe, perfectly fine, and they just have a different model of providing care internationally in some places. But either way, we do research and make sure that they are doing what they say that they are.

And one other thing that I think makes the Plan C Guide really special is that we have customizable search filters to get into the nitty-gritty details of providers with ease. And so making sure that our site is user-friendly is a really, really big deal because there's so much information on it, and we want people to be able to quickly find what they're looking for. And so we have really fun filters, which you can see if a provider has discounts available, if they accept insurance or Medicaid, if they offer pills in advance, if they don't require any video visits, if they offer period pills, the ages that they serve, languages that they are able to accommodate, weeks of pregnancy that they will prescribe until. And these are just the base level of filters. There's also other things like ship time filters, price filters, all those kinds of things to hopefully make it as easy as possible for people to find which options will be right for them.

And finally, we also have an extensive resource list and FAQ section to help guide visitors in finding the information that they need. And this is really nice because, of course, finding the pills is one thing, but there's also a lot of other things that people may want support with, whether it's like medical advice, legal advice, emotional support, financial support, all of those things. And so, we try our best to collect all the information we know about groups that are providing support services for people utilizing self-managed abortion or tangentially related services to make sure that we can collect that all in one place to make it super, super easy for people to find all the information they need in one place.

And so, while we're at it, I wanted to talk briefly about abortion pills in advance because, over the past few years, this has been a care option that has grown immensely in popularity. And what it is, is that some people are taking control of their reproductive health by ordering abortion pills in advance before they're even pregnant. And this is called advanced provision or some people will just call it getting pills in advance, but really it's just getting a medication before it is needed. And the Plan C Guide lets visitors see which providers offer this service in their area because there are some providers who really focus on just people who are actively in need of abortion pills, but there are others who provide abortion pills in advance as well.

And a lot of times, when we talk about advanced provision, the most common question we get is, "Okay, but how long can I keep them?" And together, Mifegymiso have a minimum combined shelf life of 18 months, though this is likely longer, and this is because mifepristone and misoprostol have different shelf lives as individual medications, with misoprostols being around 18 to 24 months and mifepristones being around three to five years. And so together, and taking the conservative estimate of the misoprostol having a shorter shelf life, the minimum combined shelf life is around 18 months. Though I always say that the easiest way to think about this is just to go based off the expiration date that is going to be listed on the box or the package that contains the pills, because there's really no way to know how long something was sitting on a shelf before it got to you, but the expiration date is a good thing to go by.

And the question that tends to come after I say that is, well, what happens after that time? What if it's a little bit expired? Do they just cease to work at all? And the answer to that is that, on the expiration date, it's not like it ceases to work at all. It is a gradual decrease in efficacy over time. And while we always would suggest not using expired abortion pills, of course, if someone's in a situation where it comes down to slightly expired abortion pills and a really unsafe abortion method, then I think the decision to take slightly expired ones would probably be better. But if you are in a position to order new ones or [inaudible 00:31:37], then that would be the best option. But of course, life happens, things happen, and we want to also center harm reduction in the work that we do as well.

And the last thing that I want to touch on are how can I ensure they stay effective as long as possible, for as long... Oh yeah, stay effective as long as possible. And this is kind of funny because I know that in this picture, I have the abortion pills in a medicine cabinet, and that's likely in a bathroom, and that's actually not where we want you to keep them. And so, I'm going to have to take a new picture because this is a little hypocritical. But actually, bathrooms are not the best place to keep medications because they fluctuate in temperature so much. They get very humid, very hot, and that can destabilize medications. And so, it's actually best to keep them in cool, dark places, so things like sock drawers, kitchen cabinets that are away from the stove, things like that. So ignore that this is in a bathroom cabinet in this picture, and listen to my words and say that keeping them in a cool, dark place will keep them as effective as possible for as long as possible.

Okay. And so, moving on to the other big program that we have at Plan C, I want to talk about the Plan C community.

So Plan C is more than just a resource. It's a community of activists and organizers and advocates who are all fighting for accessible self-managed abortion care. Every time we had something big happened in the news, when it related to abortion, whether it was like Dobbs or SBA in Texas or some big restriction of abortion care, we would always get a big outpouring of support and people wanting to get involved. And the way that we house that support over the years is the Plan C Community, which is our hub for community education, advocacy, and engagement. And over the years, the Plan C Community has grown immensely, and there are

now so many ways to get involved through the community, and that includes everything from free webinars and newsletters to Plan C stickers, which...

Brief side note about the Plan C stickers. We have given out millions of these stickers, and it always blows my mind when I go places and I see a Plan C sticker out in the wild. You have no idea how excited I get. I'm like, "Oh my gosh, there it is. It's right there. I can't believe it." And I always see them in the most random places, which I love. I've seen them in bar bathrooms. I've seen them in airports, train stations. I've seen them on stop signs in New York City. They're just everywhere. I think, for me personally, as someone who's been at Plan C for a while, it's such a really cool way to see your work out in the world and to see how willing people are to share this information in their communities. It's just been so cool. And so, Plan C stickers are free to order, and I will also drop in the chat the link to where you can find these stickers and things.

And we also have DIY advocacy materials, as well as a free newsletter and Discord servers. And so, there are so, so many ways to get involved, and you can check out all those different ways on the Plan C Community website. But there's one way in particular that I want to really touch on because I feel like it's one of our really exciting projects, and that is the Plan C Community Road Trip. And this is our... Let's call it our information tour. And this year, it's running from April 25th through November 15th, 2026. And we are trying to reach all 50 states and also Guam and Puerto Rico. And the road trip is really a six-month nationwide outreach effort that brings abortion pill information directly into communities wherever people are already gathering.

And so, this is always a fun point to know, is that we actually... The Plan C team is not traveling to all 50 states, but what is traveling is the information. And what makes the road trip so fun is that it doesn't ask communities to change. It asks what's already happening and how we can support the work that groups are already doing to spread information about self-managed abortion. And this is really important because access to abortion information can be uneven and confusing and often intentionally restricted in a lot of places. But people still need answers. They still need community. They still need access, and that's really where the Plan C Community Road Trip comes in, and we meet people where they're at. And whether it is at bookstores, comedy shows, campuses, kitchens, mutual aid events, everywhere, it has been really, really cool to see how creative people get with the ways in which they share information.

And some of the cool projects that have come out of this are partnerships with groups like The Autonomous Body Shop, which is a mobile mutual aid project. And we worked with them to do happy hours, college zine nights, tabling at street fairs and protest. Groups like The Unapologetic Street Series, which we worked with them to host outreach events at nail shops impacted by ICE raids, clinic info-shares in Puerto Rico. And also groups like The Turnaway Project, where we worked with them to do staged readings of a play that took the original Turnaway research study, which looked at how abortion impacts people and the ways in which they [inaudible 00:38:56] and how not being able to access abortion affected their lives. And they turned that research into a play and we worked with them to do stage readings of that play.

But the really cool thing about the Plan C Road Trip is that it can be anything. And I think that as someone who works in the partnership sector of Plan C, I always love this part because we get to meet so, so, so many cool activists with so, so many cool ideas about how to spread the word. And I have been able to be a part of events that are like banned book fairs, pole dancing workshops. What else? Yes, nail salon, all the things.

And so the really cool thing about this is that anyone can email us if they have an event that they would like highlighted or supported, and we make a really big map of where all these activities are happening around the country, and we always are looking for people who want to get involved. And so that can look like hosting an event. If you want, we can become a long-term collaborator. It can look as simple as tabling at an event with Plan C materials. It could look like co-hosting an info-share or community conversation with the Plan C Community team, adding stickers to your outreach efforts. We've also had people do sticker bombing parties and all sorts of things. And so really the more creative, the better. And this is really just an opportunity for all of the creative juices that live in the heads of the abortion advocates to have a space to live and to get connected.

And we also have a community Discord server. And so, with that same link to the Plan C Community, you are also welcome to sign up for that. And that's where all of the planning and the camaraderie of talking to other abortion advocates across the nation where that all occurs.

And so the next thing and the last thing I want to talk about is next season on the Plan C Community. So this is a little sneak peek at something that is upcoming. So you heard it here first. We are looking at developing the Plan C Communiversity, which is coming summer, fall 2026. And this is really just going to be Plan C's new learning hub for SMA information. Currently, we have a whole bunch of different webinars that we do. So those include things like our LegalEagle webinar, which looks at... Wait, can people still hear me?

Amelia Bonow:

Yeah.

Imani Askew-Shabazz:

Okay. Okay, great. Thank you.

Amelia Bonow:

Yes.

Imani Askew-Shabazz:

Which, right now, we have a whole host of different webinars. So the LegalEagle, which looks at legal issues in the self-managed abortion space, where people can get their legal questions answered. We have an Ask the Midwife one, where people can get medical questions answered

and talk to midwives about abortion topics. We have a digital security webinar, where we look at all the new ways to keep ourselves safe online. And we currently do all of those in separate and siloed spaces, but we're going to bring them all together.

And also, with this Communiversity, there will be opportunities for things like town halls and other educational events and more. And so, if you want to stay updated on the launch, the best way to do so is to sign up for the community newsletter, and we'll learn more about it there. And so I actually sped through this, and that was the last thing that I wanted to talk about. So I have a little bit of extra time for questions.

Amelia Bonow:

Yay. Thank you, Imani. It's really amazing to reflect on 10 years and like... I don't know. Looking at the timeline and thinking... I remember so much the moment really when SBA happened, which I guess that was... It was 2021, right?

Imani Askew-Shabazz:

Mm-hmm.

Amelia Bonow:

Yeah. It was maybe a little less than a year before Dobbs.

Imani Askew-Shabazz:

Mm-hmm.

Amelia Bonow:

And I feel like that was the moment where just Plan C broke through to mainstream culture.

Imani Askew-Shabazz:

Yeah.

Amelia Bonow:

It felt like overnight we went from living in a country where just still media coverage was really, really in the dark about... Definitely about SMA, but even just about pills being commonly available. People didn't know about pills. And then it was overnight, literally SBA went on the books at midnight, and I remember just really feeling like, "Oh wow, Plan C, the campaign, is super ready for this." And it was like a real cultural breakthrough moment. I don't know if you remember it in the same way.

Imani Askew-Shabazz:

No, SBA was actually a really interesting time. And thinking about that actually, with the stickers that say need to be unpregnant, that actually happened because of... We did a campaign after SBA in Texas to just let people know that abortion pills still existed and things. And we wanted to

do a mobile billboard, but every single mobile billboard was like, "We will not put abortion on the billboard." And we were like, "Okay, how about unpregnant?" And they were like, "We don't love it, but okay." And that is how the need to be unpregnant phrase actually came into existence.

Amelia Bonow:

Oh, wow. I did not know that.

Imani Askew-Shabazz:

Yeah. And people really loved it, so we kept it.

Amelia Bonow:

Yeah. I mean, I think that it ended up iconic.

Imani Askew-Shabazz:

Oh, here, I can also stop sharing so that we can...

Amelia Bonow:

Oh yeah, okay.

Imani Askew-Shabazz:

Okay.

Amelia Bonow:

There you are. Hello. Yeah, I think that is really interesting that that's how it came to be. I had no idea. Yeah, I feel like SBA was a moment where... I mean, I don't ever want to say that anything had a silver lining, but I think that for a lot of abortion funds, a lot of folks had been working locally, and then it was all of a sudden, because so many Texans were having to leave the state, abortion just became national, abortion advocacy and what had essentially been localized practical support became national. All of our networks just started getting super dialed overnight. And it was like also just Plan C, the guide was there. And so it was just like when everyone is like, "What do we do?" It's like, "Go to Plan C. That's the answer."

And I mean, I don't know how much data we have at this point on like... Because Texas is such a huge state. I think it's maybe there's more abortions in Texas than maybe any other state except for Florida, I want to say. I should check before I say something like that. But I know that there are a lot.

Imani Askew-Shabazz:

There's a lot.

Amelia Bonow:

There's a lot. It's a huge state. There's a lot of people in the state. There's a lot of poor folks in the state. There's a lot of people with parents, existing parents. And I think that... I don't know if

we'll ever know how many people received pills by mail versus leaving the state, because obviously there's not super clear-cut data on SMA numbers. Although one thing I wanted to ask you about is Plan C has been recently talking about the numbers of people that are using community networks to access pills which like... Can you just explain what a community network is real quick?

Imani Askew-Shabazz:

Yeah.

Amelia Bonow:

And maybe if you can, I don't know how public you all are being with those figures, but I feel like there's some new data.

Imani Askew-Shabazz:

Yeah. So, community networks are basically groups who have... They take generic abortion pills, repackage them, and distribute them for free within communities. And they're really, really cool because they are regional. So, different regions will have different community networks. And the other really cool thing about them is that they offer this accompaniment model along with them. So, you're not going to be alone in the process. And if that is something that is important for someone's abortion process, then it's a really great option as well. And they're free. And that is also the really, really cool thing about community support networks.

And it's interesting because, over time, we know that abortion pills, like telehealth abortion as an option in general, is growing exponentially. And I want to say, now we're at one in four abortions are telehealth abortions, and community support networks I think are still growing in knowledge and popularity. And so I don't have the exact number for people who are using community support networks, but I do know that we used to only have four community support networks on the guide, and now we have upwards of like 10, 15-ish. And so they're growing so much. And as people are starting to learn more about the model, it's becoming a really popular one.

And I think it makes sense because I think, at its core, it is exactly what we want for demedicalizing abortion pills and a model that really supports communities supporting themselves, and it being such an accessible option for people and a way to also get support during the model. And I know that when... I've met some of the people who run these community support networks, and it's a real interesting model for decentralized organized care. And so I find them really fascinating as well.

Amelia Bonow:

And it's very important for people to understand that, when stuff is happening like the mife case... I'm sure that you share my frustration that, when you look at the coverage in the media of stuff like this, it makes it sound like abortion pills by mail might be going away.

Imani Askew-Shabazz:

Right.

Amelia Bonow:

The government, the FDA, the courts, whatever, are going to take away telemedicine, and that the implication is that telemedicine from a shield provider essentially is like the only way to access pills by mail. And we know that that's not true, and that there are not only community networks, like you said. Probably a dozen of them. There's also online, just websites that sell pills, and those are, as you said, being periodically verified, tested, secret-shoppered by Plan C and Plan C colleagues who are doing everything from testing meds to verifying wait times and legitimacy, et cetera. And there's also online, or I mean, overseas pharmacies.

So it's like those three paths to access between community networks, online pill retailers, and overseas pharmacies, those are already operating outside of the system, and so they're not going to be deterred by regulation. And we just need people to, I think, get to a place where they're separating their political anxiety and their anger that is so valid, necessary, all of that, their anger about what is happening to us politically, and taking away our rights with our ability to access abortion.

Imani Askew-Shabazz:

Yeah, yeah. And I think that partially part of it is that we're still doing a lot of work to make sure that people know that this exists.

Amelia Bonow:

Yeah. Oh, for sure. For sure.

Imani Askew-Shabazz:

And so, I think that because there's still so much work needed for people to understand what the full ecosystem looks like, I feel like they're like, "I didn't know that there [inaudible 00:53:56] community support networks or that the international providers were separate from the domestic providers." And I'm in the weeds of this every day, so I know this a lot. But I feel like part of the task during this most recent case was to try to start to differentiate between the different ways and different routes through which people can get medications, which previously I don't think people were that interested in learning about, but now I think it's [inaudible 00:54:24].

Amelia Bonow:

I mean, this is a very basic question, but as someone who's been thinking about this obsessively for the better half of the decade and talking to people about abortion pills, what do you think are some of the most persistent myths about or misconceptions about abortion pills and access to abortion pills?

Imani Askew-Shabazz:

Yeah. Oh, there's actually so many. I feel like the biggest one we get is still the-

Amelia Bonow:

Plan B?

Imani Askew-Shabazz:

... Plan B one, and we're still working on it.

Amelia Bonow:

We're still working on it. I know.

Imani Askew-Shabazz:

That and the weight limit too.

Amelia Bonow:

Yes, yes.

Imani Askew-Shabazz:

Because a lot of people still think that abortion pills have weight limits, and they do not.

Amelia Bonow:

Yeah, right.

Imani Askew-Shabazz:

But I also think that a big kind of myth about them, or at least not. I won't say it's a myth, but I think that partially media has given people this idea that people are in dark corners having these really hush-hush, self-managed abortions. And I think that scares people, and it makes them feel like, "Oh, I don't want to do this model. No one's going to be there to support me if that's what I want." And I feel like...

So now, having to be like, "No, actually if you want to be all by yourself, that is so fine. But there's also so many other resources out there to support you through this that aren't necessarily a medical doctor, but they are really..." And actually, they might be a medical doctor because M&A Hotline does have medical doctors and clinicians, but also there's peer support and all these other ways to get care that I don't think people think about off the top of their head, and also media doesn't make it easy to think about them. But I feel like that has been a myth, or maybe a misconception, that has been growing.

Amelia Bonow:

And it has everything to do with stigma. I think stigma, and also just the collective trauma that I think a lot of people have just around the idea of back alley abortion and just how things used to be in our parents' generation when it wasn't safe. It was not safe to access abortion outside of legality, and that's simply no longer the case. I wanted to ask you about... You talked a little bit about legal risk, but I wanted to ask how you talk about that to someone who is expressing apprehension about like, "Is it safe? Am I going to get in trouble?"

Imani Askew-Shabazz:

Yeah. And that's always a really hard question because people have such different definitions of even what trouble means.

Amelia Bonow:

Yes.

Imani Askew-Shabazz:

And I think that-

Amelia Bonow:

Yeah. And risk is like a personally defined thing, you know?

Imani Askew-Shabazz:

Yeah. And what I always say is that, of course, we're not lawyers. We can't guarantee 100% safety in any clear-cut way, but we are all working to minimize risk as much as possible, and we have so many resources to help out in that. And I think that that is also, again, with people not knowing that there are actually so many resources out there to help them in this process. But that being said, most of the laws around self-managed abortion provision don't actually target the person themselves. They target the person who is giving the pills.

And also, we are trying to do more education around digital security and safety so that people could feel more secure in being able to know that their digital footprint isn't being tracked. And this is important, not only in the abortion space, but increasingly as data becomes currency in this world.

Amelia Bonow:

Yes.

Imani Askew-Shabazz:

Things like VPNs or using more encrypted browsers are just things that should become things that we do. And that's really annoying, I know, but in a world that technology really is like, I don't know, our overlord, we have to kind of shift there.

Amelia Bonow:

Yeah. I mean, I think that it is a hard question to answer because you don't want to be overly... because everything risk assessment is completely personal. And it's like I believe that in the same way that a person is the only person that knows what to do with their pregnancy. They're the only person that knows how to navigate their own lives and who they are and what their community is like and what their risk profile is and just all of the things. But we can say that

hundreds of thousands of people have safely, successfully self-managed their abortions in states with restrictions at this point, and without facing prosecution.

Imani Askew-Shabazz:

And they're working so hard.

Amelia Bonow:

And that the relative number of people who have faced prosecution is incredibly low.

Imani Askew-Shabazz:

Mm-hmm. Yes. And they are working so hard to try to restrict it because they know people are still doing it. So, I think that's also [inaudible 01:00:13] that this is not like a small kind of movement.

Amelia Bonow:

No, no, exactly.

Imani Askew-Shabazz:

This is a big thing that has been happening for years. And also the fact that it has been happening for years, I think, is also what I want people to understand, because I think sometimes people will come across it because they saw whatever the most recent news thing is and they're like-

Amelia Bonow:

Totally.

Imani Askew-Shabazz:

... "Oh, this is a new thing." But no, this is not a new thing. This has been a thing that's been around for decades, and even longer in other countries. And so, we're not stepping into this new unresearched space.

Amelia Bonow:

Right. And it doesn't have to be even a last resort, right?

Imani Askew-Shabazz:

Mm-hmm.

Amelia Bonow:

It's like I want people to know... I live in Seattle, and we have really good abortion laws here. And also, I want people to know that if you get pregnant in a place like this and you want to end your pregnancy with pills, you don't have to go obtain them at a clinic and pay \$700. You can get them for free from a community network.

Imani Askew-Shabazz:

Mm-hmm.

Amelia Bonow:

And you can find support during your experience from... Like you said, there's a whole menu of options, whether it's peer support, emotional support, support from a medical provider who's working at the M&A Hotline in their off time. It doesn't have to be alone. It doesn't have to be scary. I think there are tons of reasons why it's a more appealing option for someone, you know?

Imani Askew-Shabazz:

Yeah.

Amelia Bonow:

Maybe you're gender nonconforming and you don't want to go have-

Imani Askew-Shabazz:

Exactly.

Amelia Bonow:

... an experience of being gendered in a healthcare clinic. Maybe you live in a super small town and you really don't want to see anyone you know. Maybe you just want to handle things on your own in a really discreet way. There's so many reasons why it's a better option.

Imani Askew-Shabazz:

And even now, we've been talking about, of course, with the terrorism of ICE-

Amelia Bonow:

Yes, yes.

Imani Askew-Shabazz:

... it can be really dangerous for people to go into medical facilities, because unfortunately, the way in which medical facilities are set up here are like agents of the state, you know?

Amelia Bonow:

Right. Or to leave their state. To leave their state and travel. Whether or not... It might be terrifying.

Imani Askew-Shabazz:

It might be terrifying.

Amelia Bonow:

And there might be just a better way that does not involve that.

Imani Askew-Shabazz:

Mm-hmm.

Amelia Bonow:

This has been wonderful. There is a question in the Q&A that is very LA-specific. Is the Unstoppable event in LA still happening next week? Was wondering where I can register. Can you tell us about updates?

Imani Askew-Shabazz:

Yeah, yeah. Unstoppable, the event, has been postponed. So stay tuned for more information about that. We wanted to do it in June, but then some little organizational things happened, and so we had to push it back, but thank you for asking. And if you are signed up to our newsletter, you will get more information about that soon.

Amelia Bonow:

Yes. And we're so excited to celebrate you and 10 years. Obviously, SYA just had our 10-year birthday.

Imani Askew-Shabazz:

Yes, it was so fun.

Amelia Bonow:

It was so fun, and I'm really glad that the Plan C team came out. And I am so excited to celebrate you all as well in LA when it happens, when the time is right. And thank you for joining us, Imani. Is there anything else that you didn't have a chance to get to that you want to touch on?

Imani Askew-Shabazz:

I don't think so, but I do always like to end in saying I feel very hopeful in this space. I know that it can be a very bleak space sometimes, but every time I do something like this and I get to see all the people who are tuning in and wanting to learn more, I always feel way better about our future.

Amelia Bonow:

Yeah, totally. Yes. Yeah, I agree. I mean, when people say stuff to me, people outside of the work are like, "Oh, your job must be hard," it's like, it is hard. There's no way around that. But I get to be around people like yourself and all of our just like movement colleagues all day, every day, who are relentless and undeterred and genuinely hopeful. And I think that if you want to

feel better, find your way into the work and be around folks that are doing it because we believe that we are going to win.

Imani Askew-Shabazz:

Right, [inaudible 01:05:06].

Amelia Bonow:

Yes, yes. And also, I saw a quote from Elisa the other day in a paper that was like... A paper. Like a media source that was like, "You can't put this genie back in the bottle." And straight up, you can't. It's never... They can't make it go away. So it's on us to spread the word, to support each other, to educate ourselves in our communities, and boom, the genie's out of the bottle.

Imani Askew-Shabazz:

Right.

Amelia Bonow:

Yeah.

Imani Askew-Shabazz:

Thank you so much.

Amelia Bonow:

Thank you so much, Imani. Appreciate you and we'll be in touch very soon.

Imani Askew-Shabazz:

Okay.