

ABORTION IN THE SHENANDOAH VALLEY : PART 1

SILENT NO MORE



Catherine Monnes and Molly McQuigg, and (bottom row) Barbara Medaries and Alex Angelich spoke to The News Leader about abortion. LAURA PETERS/THE NEWS LEADER

Valley women speak out about personal experiences with abortion

Laura Peters Staunton News Leader
USA TODAY NETWORK

Editor's note: This is the first part of a longform story. It will continue in Monday's paper.

Barbara Medaries entered a seedy motel in Detroit with \$200 in her pocket and her boyfriend by her side, looking for a way out.

It was 1970, and Medaries was 19 years old.

"You call this number, and they gave you a time to be in a motel in Detroit," she said. "You were supposed to bring painkillers and antibiotics with you. Being as stupid as I was, we didn't do that."

At a predetermined time someone knocked on the door. When her boyfriend opened the door, a tall woman in white with a bag in her hand was standing in the doorway.

She stepped in, put her hand out and Medaries placed the cash into the woman's palm. The woman asked everyone to leave except for Medaries.

What happened next almost killed her.

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Abortion

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Abortions are happening, even if a wider discussion is not

1,151 women from Staunton, Augusta County and Waynesboro had abortions between 2009 and 2017. That averages out to more than 100 a year. One every three days.

There's no clinic or hospital that provides abortions in the Shenandoah Valley. These women had to travel at least 40 miles one way from Staunton to find one. Because Virginia law requires a 24-hour waiting period after a mandatory ultrasound, the trip had to be made twice. Some traveled hundreds of miles, statistics from the Virginia Department of Health show.

This does not include those who ventured outside of the Commonwealth. Maryland has no 24-hour waiting period and has long been considered an option for women in Virginia seeking abortions without the restrictions to access.

There has been a history of strange radio silence about abortion in the Valley.

A search for public social media posts on Facebook and Twitter over the past 12 months shows no public posts tagged within Augusta County, Staunton or Waynesboro by women talking about their abortions. No #abortion hashtags, no #prochoice or #prolife either. No #youknowme posts by women going public with their abortion stories.

Just silence. Although, now, for some, that is starting to change.

At church, in offices, at home, women from four generations sit quietly with their stories.

Few are willing to talk publicly about it. The News Leader interviewed 15 women about their abortion experiences for this story, but most were not willing to speak on the record. All the persons included in the story have some first-hand experience with abortion — as women making a choice to have an abortion, as medical professionals or political activists who have interacted with women who've made that choice.

Some of the women we spoke with are now counseling other women who are just looking for someone to talk to after an abortion. Some are helping to procure funding for safe abortions for those who could not otherwise afford it. Some are trying to bring medical accuracy to the political conversation where the lines of science and politics are often blurred by a catchphrase.

Some are women who, despite their desire to maintain the privacy of such choices, felt that speaking out would empower others.

Some are anti-abortion, some for abortion rights. Whatever their political stance, they all seem concerned with making the world a safer and more comforting place for women than it was before Roe v. Wade.

How they want to accomplish that is where the common ground begins to thin.

When abortion was illegal, she risked her life to get one

1970. Medaries was heavy into the drinking and partying scene while

growing up in Michigan. She dabbled with it in high school. She dove in deeper as a young adult.

While attending community college she started dating a man — a drug dealer.

"Mostly amphetamines and that sort of thing," Medaries, now Staunton resident, says. "So we just partied hard."

Months later she was pregnant. "And he immediately said, 'I want you to have an abortion.'"

It was before Roe v. Wade defined the terms of abortion law. Medaries had to obtain an abortion illegally.

Drug abuser. Hard partier. Pregnant out of wedlock in her teens. Obtained an abortion illegally. That's not the typical public profile of an anti-abortion woman in the Shenandoah Valley. But that's part of Barbara Medaries' history.

It's a part of her personal history that she talks openly about with other women, and it's informed her personal mission.

Medaries sought out and obtained her abortion despite the law. Yet today she says things would be better off if strict abortion laws were passed.

"I understand the viewpoint that these laws will prevent many women, especially those who are in a low income bracket" from having access to abortions, she says. "Women who can afford them will travel to a state with more lenient laws. But I am a firm believer that life begins at conception."

Medaries now works as a peer counselor and facilitator for ComfortCare Women's Health in town. Her work is part of the Healing Emotions and Renewing the Heart program. She uses her abortion stories to help women who have had abortions.

Stories, plural. Because two years after her first abortion, she received another, this time just months after the landmark Roe decision. She was lucky to be alive to make that choice a second time, she tells The News Leader.

"I remember lying on a bed feeling very sad, empty ... just lost," Medaries recalls her second abortion. "Thinking, why is this happening to me again? Why am I doing this?"

Medaries' sense of anguish may be familiar to many women. It leaves them a sense of a future that never happened.

Others knew exactly why they were making a decision. And the future that followed the decision is their own answer to that question.

'If I hadn't had that abortion, she would not exist'

2007. Alexandra Angelich remembers the late afternoon meal inside a Dallas, Texas, restaurant with her boyfriend as a special moment.

"We just kind of sat together in peace and tried to figure out what our lives together were going to be like," she says. "It was very early in our relationship, but we were forming a bond that was going to last."

They had only been dating two months. Angelich had just had an abortion.

Angelich had gone to Planned Parenthood to get birth control in the beginning of their relationship. She was told to start the pills the Sunday after her next period.

So she waited. And waited. Until nothing happened. The period

didn't come.

She informed her boyfriend of the situation. She was pregnant.

"He did not have his life together yet and neither did I," she says. "I wanted to go to college. I hadn't yet, but I was living on my own and trying to and I was working in restaurants."

Her boyfriend was 23 and doing much of the same. So they both came to the same decision — to have an abortion. It was simple, she said, they both decided they weren't going to have a baby at this time.

"It was a pretty easy decision," she says. "It was like, we're going to have an abortion, with the rule that if we ever got pregnant again, that we weren't going to have another abortion."

She was six weeks pregnant when she had her abortion. She and her boyfriend went to a clinic in an upscale part of Dallas, Texas. She went up to the receptionist, who she said was nice, supportive and friendly. Her boyfriend paid for it.

The clinic was like a mix between a doctor's office and a hospital.

"It was really clean and really professional," she says. "It was like a really nice doctor's office."

She was taken back alone.

From there she had an ultrasound, saw the fetus and heard the fetal pulse. She was offered counseling, but declined.

"And they said, 'Do you want to have an abortion?' I said yes."

She was then taken to another room, given a pill she assumed was a pain pill and then what she thought was nitrous. There were four people in the room — her, the doctor and possibly two nurses.

"So I was kind of awake but also not really awake," she says.

She wasn't scared. She felt safe with the health professionals in the room.

Angelich remembers putting her feet up in the stirrups of the patient's table, much like in a standard gynecological exam. There was a pinch, then a suction and everything went black for her.

"I woke up and I was really woozy."

She was in a different room, a type of recovery area. Her boyfriend was the first face she saw after the procedure in that room.

They left and went to a restaurant shortly after the procedure.

2019. That boyfriend is now Angelich's husband. The two have been together for over a decade and married since 2011.

"When you go through trauma with someone, it can really bond you with them," she says. "I don't really know how else to explain it."

The abortion itself wasn't traumatic, she says. It was the pregnancy.

"We were both so young and so scared," she says. "A pregnancy or a child when we were that young and that unprepared was going to put us into poverty forever. It was probably going to break us up. I would have had to move home with my parents who were 250 miles away. I doubt he would have wanted to come with me. I'm sure he would have tried to support me somehow. There's no way to know."

Her current life wouldn't have happened if they kept the baby, she says.

She started community college full-time, while working in a restaurant full-time. The two saved up enough money and moved across the country to Virginia in 2008. Angelich started community college in Charlottesville after establishing residency and applied to the University of Virginia.

She graduated with a degree in astronomy in 2011. She and her husband got married shortly after that, bought a house and started a rooted life together. She works in the office of communications at UVA.

The two had a baby girl in 2015.

"When I look at my daughter, and I think about what would have happened if I had a baby 12 years ago, I know for a fact that this little girl wouldn't be here," she says. "If I hadn't had that abortion, she would not exist."

Read more stories in *The News Leader* on Monday from women who've had abortions or work with them.

Getting it right

The News Leader strives to be accurate in its reporting. If you think we've made a factual error, please call Executive Editor David Fritz at 213-9116. Corrections will appear on this page.

Lottery

Pick 3
Saturday Day: 2-9-2

Friday Night: 7-7-8

Pick 4
Saturday Day: 5-5-0-1

Friday Night: 4-0-1-2

Cash Five

Saturday Day:

20-21-29-33-34

Friday Night:

9-13-26-33-34

Mega Millions

Friday: 2-35-49-53-63

Mega Ball: 1



Sidewalk Sale

Staunton Downtown
July 5 through July 7

Latitudes Fair Trade

Abortion in the Shenandoah Valley: Part 2

Laura Peters
Staunton News Leader
USA TODAY NETWORK

This is Part 2 of a longform story that examines what women who've had abortions are talking about in the Shenandoah Valley. We spoke to 15 women for this project, both anti-abortion and abortion rights supporters.

Tannis Fuller wears a tan skirt with a deep blue shirt that reads "Blue Ridge Abortion Fund" with a graphic of mountains in the middle. She's one of nearly 100 people — women, children and men — gathered at an abortion access rally in Charlottesville in late May.

It's a far cry from the days where

"abortion rings" were being rounded up by local police and doctors thrown into jail. From when women took great risks to get an abortion, and when some paid for it with their lives.

They stand near the free speech wall on the downtown walking mall near Charlottesville's city hall, holding signs reading "Pro faith, pro family, pro choice," "Keep abortion legal" and "Your uterus, your choice."

As with many such protests there's a sense of anger and outrage, but there's also a sense of camaraderie and celebration of people working together to accomplish something.

But before The Blue Ridge Abortion Fund logo was appearing on T-shirts at

protests, before it had a name, it was a response to a single woman's desperate need.

At the 1989 Albemarle County Fair, a woman approached a Charlottesville National Organization of Women table looking for a way to fund a friend's abortion.

Women were able to access abortion funding through a "whisper type of way," says Fuller.

"What we really do is support people who have made in-depth decisions about their lives. Abortion is a really politicized issue. Supporting people making those decisions is compassionate."

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Kobby Hoffman, of Charlottesville National Organization of Women, speaks on the downtown walking mall in Charlottesville May 21 for an abortion access rally organized by the Blue Ridge Abortion Fund and Charlottesville National Organization of Women. LAURA PETERS/THE NEWS LEADER

Abortion

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The organization helps women throughout the state but they focus their resources on underserved areas. That includes Staunton, Augusta County and Waynesboro.

They don't ask questions. There's no set of requirements a woman needs to meet. All it takes is a phone call.

The BRAF is part of the National Network of Abortion Funds, which comprises 75 abortion funds in the U.S. In its first year, the Blue Ridge Abortion Fund helped six women obtain funding for abortions. This year, the BRAF expects to serve 1,000 people with more than \$250,000 of funding.

Even as the overall number of abortions declines both nationwide and statewide, funding is still a matter of urgency for women who believe in abortion rights.

In Virginia, among other states, abortion isn't covered by insurance or Medicaid.

"Abortion is essentially a cash business," Fuller says.

To that extent, some things in fact haven't changed since abortion was illegal and Staunton's Barbara Medaries was placing \$200 in cash in the hand of a stranger.

Other things that haven't changed are the stereotypes of women used to frame the debate, and a lack of knowledge about the medical procedures involved.

Taking stock of abortion complications

The framed print in Dr. Molly McQuigg's office offers a view of the back of a woman's legs.

A decidedly male gaze, at that.

Ascending the calf and thigh like rungs of a ladder, horizontal black lines indicate various hemlines. Advancing from the lowest mark and reading up to the knee, they are labelled "matronly," "prudish" and "old fashioned." As the ticks go higher, the words become more harsh — "flirty," "cheeky," "provocative," "asking for it," and finally at their apex "slut" and "whore."

The artwork by Rosea Lake titled

"Judgement" is one of McQuigg's favorite pieces in her Fishersville office.

It's part of an organized chaos, framed by her diplomas from Duke and The Medical Center of Chicago which hang above it all, that get her from appointments to surgeries and back again.

She's animated, energized and perhaps a bit frustrated, trying to make a simple point about a single medical procedure known as a dilation and curettage (D&C), which she says all first year residents learn to perform.

"It's the same procedure whether it's a postmenopausal lady who's bleeding well after she should have quit having periods, or if it's a lady that's just bleeding a lot with periods and you're trying to figure out why. Or if it's a miscarriage that needs to be evacuated so that the person doesn't bleed a lot more. Or if it's an abortion — it's all the same procedure," she says. "The D&C is the same thing, no matter what one of those things is."

McQuigg has been working at Augusta Health Care for Women as an OBGYN since 2008. Her concern as a medical professional is how legislative efforts to control abortions can influence any doctor's ability to help patients in need of medical treatment.

An abortion is any procedure to end a pregnancy which uses medicine or surgery to remove the embryo or fetus and placenta from the uterus, according to the U.S. National Library of Medicine.

When laws crafted by politics define a specific procedure such as a D&C as always being "abortion" it can create legal problems for medical professionals and their patients that anti-abortion activists and legislators could not imagine.

Why the restrictions?

Restrictions have also been placed on medicines associated with elective abortion.

The abortion pill — mifepristone used along with misoprostol — doesn't have to be used for abortions alone. The pills combined help evacuate the uterus of tissue, and could allow for a safer way to have a miscarriage.

According to McQuigg, the person has to be handed the actual drug by a clinician, who has to be pre-registered and keeps a version of the drug in stock and on site.

"So we're not allowed to write a prescription because pharmacies don't stock it," she says. "The hysterical regulations that have been passed do not allow us (OBGYNs) to access mifepristone to use along with misoprostol in a protocol that has been shown to reduce bleeding and accomplish delivery of a second trimester miscarriage in a shorter and safer way," she adds.

She says the same components used in a medical abortion have been used to induce delivery in cases where the baby is dead in the second trimester. Under Alabama's new law, that procedure would be classified as an abortion and prosecuted as Class A felony, punishable by life or 10 to 99 years in prison.

'I was in this state of being controlled, that's how I felt'

In another office 10 miles to the west, Barbara Medaries sits in a small room off of the waiting area in an old house off Augusta Street in Staunton. Comfort-Care Women's Health has been around since 1983 as the Pregnancy Help Center. In 2005, it became ComfortCare.

The staff help clients understand why they don't have to choose abortion, how they can protect life and have a baby — whether they keep it or seek adoption procedures. And they counsel and support women who have gone through abortion procedure trauma and post-procedure stress.

Medaries grew up Catholic. At first she hid the fact of her pregnancy from her family, but her mother found out.

It suddenly became a family affair. Her mother wanted her to go to a place to have the baby and then have the baby adopted.

"She said I would be excommunicated from the church if I had an abortion."

"I just remember that as part of this movie in my head as I was scared to death. I was already in kind of a state of numbness, feeling pulled in many directions by what the boyfriend wanted me to do, which at that moment in my life was the most important thing. Whatever he wanted I wanted and then what my dad wanted and what my mother wanted. So I was just kind of in this state of being controlled, that's how I felt."

Everyone involved was concerned that Medaries' drug use could have such complicating effects on the pregnancy

and viability of the fetus that the pregnancy could legally be ended with a local doctor. After an examination, however, the doctor said she was fine to continue on with her pregnancy.

She and her boyfriend had other plans.

There was a number she could call for another doctor that would perform abortions.

The procedure performed in the hotel room "included a rubber tube and a piece of wire" and it was done in just a matter of minutes.

"I remember lying on the bed feeling just grossed out by the whole thing and scared," she says.

Medaries was told within 48 to 72 hours, she would miscarry the baby.

The next morning she called her mother and informed her what she did.

"And she said, 'That's what I figured.' I basically had gone missing and told her I'd be back the next day," Medaries says.

By the time they all got home, she was feverish. Her parents called the family doctor who said to take her to the hospital.

When she was admitted, she was shivering and had a temperature of 105. She was in the middle of having a miscarriage. She arrived at the hospital on a Monday and miscarried on Tuesday.

Medaries says her pregnancy was far enough along that her mother could determine the sex of the baby.

"My mom was standing right beside me, and she said it's a boy."

During her stay in the hospital, she went through eight IV bags of antibiotics.

"My doctor, said, 'You could have died.'"

Her second abortion was different, like a blip on her memory map. It was done legally, safely and in a clean clinic. It was in a plain brick building. She doesn't remember much else.

Recently she had a flashback from that day at the clinic. An image of an empty glass jar she saw when she was in the room.

"I remember seeing that jar, walking in and thinking, 'Wonder what that's for.' And then I realized later what it was," she says.

Look for the final part of this long-form story in tomorrow paper.

Abortion: The impact of having 'the choice'

Laura Peters

Staunton News Leader
USA TODAY NETWORK

This is the final part of a longform story that examines what women who've had abortions are talking about in the Shenandoah Valley. We spoke to 15 women for this project, both anti-abortion and abortion rights supporters.

Birth control never worked for Catherine Monnes. She got pregnant four times while using contraception. "I have conceived through the pill and I'm not careless," she says.

She's also conceived through an intrauterine device and a diaphragm.

Monnes is tearful thinking about having four abortions. It's not guilt that threatens her composure; it's the constant threat of the shame from external forces.

Monnes has spent the past few decades in the Nelson County and Charlottesville areas. She's a massage therapist and musician who's best known locally for her time as a singer with Staunton-based The Findells. She performs in a number of bands now — currently with her daughter in The Sally Rose Band.

And she is, as she says, "phenomenally fertile."

She lives in Charlottesville in a quaint home on a quiet street. She's a picture of female self-comfort and self-control, confronting questions about her abortions while casually perched on a chair with one leg propped up on the seat and the other

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Abortion

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reaching to the floor. Wearing a red shirt that's cut at the collar. A lamp on the table before her illuminates her face, and the tears welling up in her eyes.

She had her first abortion at the age of 21 in 1976.

"The first serious relationships I had through my 20s were not ones that either of us wanted to commit to a lifetime together, or to parenting together," she says. "I'm so thankful that I had the choice."

Like many women who've had abortions, she's less concerned about a past someone else may have determined for her than grateful for the past that developed into her actual family — two grown daughters she gave birth to at a time in her life that she was capable of raising them.

She had her children in her mid- to late-30s. The majority of her abortions were in her 20s — and she wasn't alone in wanting to not have the baby.

"The men have also not wanted these children," she says. "There is responsibility there that is not being culturally acknowledged. I at least, in most cases, have had men that stood by me and supported my decision."

And she was supported by friends and family.

Monnes does not pretend to be happy about making the choice to have an

abortion. But "I had no doubt, it was absolutely clear to me, that it was my right choice," she says. "I was supported by everyone close to me in those choices, including my mother."

When Monnes was growing up in Washington, D.C., sex education was minimal. Birth control was seldom mentioned. To access birth control, you had to do some shady stuff, she says.

"You had to lie — about who you were, about your age, to your parents — and skip school," she says. "You had to follow some weird channels."

Monnes has not felt the trauma that's often described as being the result of abortions. Her emotions about it come in slow waves. Her distress has come from the self-enforced silence, the lack of being totally open, the feeling that if a woman does talk openly about abortion she will face wave after wave of culturally manufactured shame. So instead those waves become silence.

Wave after wave breaking against generation after generation of women.

And maybe now is the time, she says, perhaps thinking of her daughters, and the generation of daughters to follow, to talk.

Opening a local, national dialogue about abortion

There's been a movement across the country in the last five years. Women have begun talking about their abortions — in magazines, on social media, but not here in the Shenandoah Valley.

Tannis Fuller of Charlottesville points to personal dynamics among family and friends as an indicator of who will likely speak publicly about their experience with abortion.

"I think that folks who do talk about their abortions are folks who have a lot of support. They aren't worried that their mothers or their fathers or their husbands or their boyfriends, or their sisters, or their partners are going to ridicule them."

Alexandra Angelich wants open conversation about abortion, but also about other important women's health issues.

"Nobody ever ever talks about ectopic pregnancy. Nobody ever talks about miscarriage. And these are all things that I experienced without knowing anybody that I could talk to about it that had any experience with it," she says.

"Women don't necessarily talk a lot about what goes on in their body," Monnes says.

Molly McQuigg believes the impacts of new laws would make women hesitate about going to a doctor or even telling providers the truth about whatever choice they made. She says a longstanding perception of women as martyrs to their children has been turned into a restrictive force.

"I think a large portion of us don't feel that way," says McQuigg, a physician.

Barbara Medaries thinks differently. "I just think abortion is a very sad form of birth control."

Where Medaries and McQuigg agree is that abortion is an intensely private

issue. The common ground surfaces above the waves of silence again, however slender. And another aspect of that common ground is control.

For Medaries it comes down to a misplaced use of birth control.

For Angelich, it's a control not over birth but over one's life, one's body as well as a body of medical history that's under-represented women's health concerns.

For Dr. McQuigg, it's control over the terms of medical procedures, dictated by legislators who don't know enough about medicine to wield such control responsibly.

Even if the new laws are upheld in court, functionally outlawing abortion in a number of states and even making it illegal to seek abortion in states where it would still be legal, Medaries does not think things would go back to coat hanger abortions — like what she received for her first one.

"I don't think that it would go back to the closet coat hanger kind of thing," she said. "I think probably there would be a black market. Depending on who's doing them there could probably be danger."

Regardless of what she thinks of the new laws, she is clear that if abortion became illegal again, it would not change what she does as a counselor.

"I would try to help that person. You know, because I've been in those shoes. I feel like I would always be willing to help somebody, whatever their situation," she says.

STAYING SILENT



Alexandra Angelich at her home in Charlottesville June 17. Last November, Angelich was diagnosed with an ectopic pregnancy — when the fertilized egg attaches itself in a place other than inside the uterus, most of the time in the fallopian tube. Ectopic pregnancies are life-threatening, according to Mayo Clinic. LAURA PETERS/THE NEWS LEADER

Communication barriers hinder women seeking reproductive care

Laura Peters

Staunton News Leader
USA TODAY NETWORK

Alexandra Angelich found herself silent once again after losing two pregnancies. She found that she had no one to turn to talk about having an ectopic pregnancy. Then again when she had a miscarriage months later.

She found that same silence in 2007 after having an abortion in Texas. She and her boyfriend had only been dating for two months and they were not in the position to raise a child.

But her boyfriend became her husband years later after they moved across the country to Virginia. Then the two began trying to have a child.

After their daughter was born in 2015, Alexandra Angelich and her husband waited a few years to try again.

Last November, Angelich was diagnosed with an ectopic pregnancy — when the fertilized egg attaches itself in a place other than inside the uterus, most of the time in the fallopian tube. Ectopic pregnancies are life-threatening, according to Mayo Clinic.

“It’s not a viable pregnancy at all.

Women can’t survive that, the fetus won’t survive it,” Angelich said.

She was given methotrexate, a chemotherapy drug, which was meant to dissolve the tissues of the fetus.

“It dissolves the fetus, the embryo and your body absorbs it,” she said. “And it’s very, very painful and just horrible.”

In February she found out she was pregnant again. At eight weeks pregnant, Angelich went in for a routine check-up to look for the heartbeat.

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Silent

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There was none. "They diagnosed me with a miscarriage," she said. "There is no heart-beat, no fetus, just an empty sack."

About 10 to 15 in 100 pregnancies — 10-15% — end in miscarriage, according to the March of Dimes. Most miscarriages happen in the first trimester before the 12th week of pregnancy, its website said.

She had to have a D&C to remove the tissue.

Of all her three experiences, including an abortion, she said the ectopic pregnancy was the scariest.

"I thought I was gonna

lose the fallopian tube, I thought I wouldn't be able to get pregnant again," she said. "There is a chance that I was going to rupture and bleed out if they didn't get it out in time. Even after they shoot you with the methotrexate — which they did twice — there's still a chance that it can rupture. So you're in a bunch of pain. And you're also like trying to figure out, is

this normal pain? Or is this the I need to go to the hospital kind of pain?"

With the new abortion laws circulating across the country, she chose to speak out on Facebook.

"I thought it would be prudent to let other people know that it's a thing. Women have to go through this stuff every day," she says. I mean, half of all people are women, we should know

about the stuff that we have to go through. And I don't want my daughter to grow up and have some scary, horrible thing happen to her that happens

to a lot of people. And she doesn't have any idea that it's a thing."

Her daughter is now three. She wants a better world for her, one where

women can talk about things, like abortion and miscarriages and other life issues that women commonly face during their adult years.



Virginia Center for Family Relations, P.C.

Welcomes

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Resident in Counseling

Counseling for Children and Adolescents

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Brian Ede, M.S.W., L.C.S.W

Freedom to choose abortion is not free

Laura Peters Staunton News Leader | USA TODAY NETWORK

It's not something that people save up for. People don't have a lot of opportunity to prepare for an abortion.

Under new laws that don't directly outlaw abortion, they'll have even less time to make a decision while often facing barriers that take time, such as the 24-hour waiting period. When a woman has to make multiple trips to a clinic 50 miles away or more to get an abortion, the expenses and delays can pile up to the point where other less safe options are considered.

This is where Blue Ridge Abortion Fund comes in.

The Blue Ridge Abortion Fund (BRAAF) was started under the Charlottesville National Organization of Women, and became its own nonprofit organization in 2009. That year, the organization helped 23 women and raised \$6,000 for women to get abortions across the state.

The cost of an abortion in Virginia, depending on how far along a woman is, can range between \$400 and \$1,700 for the procedure, according to Tannis Fuller with the Blue Ridge Abortion Fund.

If you don't want an abortion, you get more options on free help.

Those women seeking counseling services about making a decision on abortion, prenatal care, adoption services and more can have all that for free. Organizations like ComfortCare Women's Health in Staunton and Thrive Women's Healthcare in Charlottesville. Those nonprofits offer free services like

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pregnancy testing, medical consultation and counseling. Even free ultrasounds and free prenatal vitamins.

Other expenses like travel add to the cost.

If a woman is traveling to Charlottesville to get an abortion that's 90 miles roundtrip from Staunton — only if they go there once. If she stayed in Charlottesville overnight to observe the 24 hour rule, add in a hotel room for at least one night.

"Financial barriers to abortion care are a significant barrier to abortion access," Fuller said. "It can be the cost of the procedure, related transportation costs, the need for childcare, or time off work. It can be not having immediate access to several hundred dollars, or not being able to freely access a large amount of money."

"It's really powerful work that we're doing. It's really easy to look at this and say, 'Oh, you fund abortions.' I mean, yes, helping folks access abortion is really fundamental, because nobody else is really doing that," Fuller said.

Financial relief in the form of BRAF

BRAF relies on private donors and some grant funding from the National Network of Abortion Funds. Donations usually range between \$200 and \$500.

"We believe very strongly that people are the best able to make decisions about their own lives, and supporting folks in a way that gives them the opportunity to make an independent decision about the trajectory of their pregnancy is really important. One of the ways that we do that, or one of the primary ways, is to help folks access abortions."

It's especially hard in the Shenandoah Valley be-



People gather on the downtown walking mall in Charlottesville on May 21 for an abortion access rally organized by the Blue Ridge Abortion Fund and Charlottesville National Organization of Women.

LAURA PETERS/THE NEWS LEADER

cause of how abortion is perceived.

"I think there's a lot of misunderstanding of abortion," Fuller said. She thinks most people do not know that national statistics suggest that one in four people who can become pregnant will have an abortion on their reproductive lifetime.

"Which means abortion is incredibly common," she finished.

