# Lack of access to abortion can complicate choice

By KATIE FRANKOWICZ and NICOLE BALES KMUN and The Astorian

Before her son turned a year old, Chelsea Johnsen had cervical surgery to remove cells that had the potential to become cancerous. Then she found out her copper intrauterine device, or IUD, had failed.

She was pregnant.

There was a chance her cervix had not healed enough to carry a baby to full term. A pregnancy could be dangerous for her. They also couldn't find her IUD.

The timing wasn't right, Johnsen decided. She wanted to end the pregnancy. Her doctor at Columbia Memorial Hospital in Astoria said she respected Johnsen's decision and offered her support, but the hospital did not provide abortion services.

"I will never forget that feeling," Johnsen said, "because it's like you have to be so vulnerable and tell someone something that has such a stigma around it and you're already a mother and just to tell someone, 'Hey, this is the choice that I've made and I'm comfortable with.' And then for them to respond with, 'I fully support you. However, we don't do anything for that.' It was like ... OK. Well, great."

Johnsen set up an appointment for an abortion with Planned Parenthood on her own. Then the results came back from an ultrasound to locate her IUD.

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Johnsen was told the abortion she had agonized over was now a medical necessity. The IUD was embedded somewhere in her body. It would be too risky to proceed with the pregnancy not knowing where the IUD was located.

In mid-December, Johnsen, who owns the Doe & Arrow boutique downtown, had an abortion procedure at Oregon Health & Science University Hospital in Portland. Right after Christmas, she had surgery to remove the IUD that doctors found pushed up against her colon.

While her doctor in Astoria could make referrals on her behalf, most of the logistics—like the initial appointment with Planned Parenthood—were left to Johnsen.

Abortion rights are protected in Oregon at all stages of pregnancy. There are no waiting periods, no mandated parental involvement, no limitations on publicly-funded abortions.

As the U.S. Supreme Court appears ready to roll back Roe v. Wade, the landmark 1973 decision that legalized abortion nationwide, Oregon is poised to become a destination for women seeking to end their pregnancies.

But despite the legal protections and the promise of expanded access to reproductive health care, the Guttmacher Institute found in 2017 that most Oregon counties — 78% — did not have any clinics that provided abortions.

Rural counties, like Clatsop County on the North Coast, are especially lacking in abortion services, creating barriers for women that complicate their health care choices.

# 'A very big political hot topic'

On the North Coast and across the Columbia River in Pacific County, Washington, abortions are not available at any local hospital. Not at Columbia Memorial, Providence Seaside or Ocean Beach in Ilwaco.

Health care providers instead refer women to Planned Parenthood or hospitals and clinics in the Portland metro area and cities along the Interstate 5 corridor hours away.

This could mean a trip out of town, time off work, maybe the need to arrange for child care. For pregnant teenagers, women who live in controlling or abusive situations or people who lack their own transportation, the logistical difficulties are compounded.

At Columbia Memorial, which is Lutheran-affiliated, obstetrician-gynecologists offer phone and office consultations when patients want to discuss abortion. The women's center provides information on abortion options and offers ultrasound and blood testing in advance. Patients can also follow up with health care providers afterward if needed.

Social workers and a board-certified chaplain are available to provide unbiased support and counseling throughout the process if patients pursue abortion.

The hospital also provides assistance with logistics, such as insurance, travel and financial issues. Staff is available to help manage potential complications or medical emergencies for patients who terminate pregnancies.

Providence Seaside, part of a Catholic



John Bruijn/The Astorian

Women on the North Coast have to travel to the Portland metro area or cities along the Interstate 5 corridor to access abortion services.

health care system, declined an interview for this story.

Tracy Erfling, a naturopathic doctor who serves as Clatsop County's reproductive health provider, said she is not aware of any clinics or hospitals in the region that offer or plan to offer abortion services.

"It's a very big political hot topic," she said. "So some people just don't want to dip their toe in that pool and just would rather utilize the sort of functioning entities that are already there to do those services rather than try to take that on."

Without meaningful access, Planned Parenthood has said, "abortion is a right in name only."

Barriers to reproductive health care are often higher based on race, income and distance from urban centers.

"Oregon has worked very hard – even in

"Oregon has worked very hard – even in more conservative parts of the state – to be a state where women and people who need abortions have complete and

tions have complete and total access to that service free of charge," said Anne Udall, the president and CEO of Planned Parenthood Columbia Willamette.

"From sort of a financial support, Oregon is just truly one of the leaders in the country for sexual reproductive heath care. We know that the rural parts of the state — it's much harder," Udall said.

Planned Parentood has been focused on Eastern Oregon, she said, "but we are also increasingly paying attention to the lack of abortion access on the coast."

In Erfling's experience, the more rural a population, the more acceptable it is to have unintended pregnancies.

"If someone wants to have a kid, even if it's unintended, we all have to be OK with that because it's going to happen," she said.

But Erfling still thinks about a patient she saw 20 years ago: a pregnant 13-year-old who came into the county Public Health Department with her mom.

"I'll just never forget the look on her face," she said. "She just had this blank stare. I don't even think that information was filtering into her mind."

The teenager's mother was nonchalant about the situation, saying she and others she knew also got pregnant at a young age.

Education about contraception and the ability to have conversations about the options during pregnancy are critical, Erfling believes. In 2020, the county's reproductive health program averted 49 unintended pregnancies due to access to contraception, according to the Oregon Health Authority. In 2019, the county

averted 59 unintended pregnancies.

The number of abortions among people from Clatsop County has remained relatively constant over the past five years. The Oregon Health Authority tracked 60 abortions in preliminary data from 2021, 46 in 2020, 47 in 2019, 64 in 2018 and 67 in 2017.

Oregon, like many states across the country, has seen abortions steadily decline over the past few decades.

"If the good teachings of contraception (are) out there, then this whole thing" — the question of abortion — "is potentially avoided," Erfling said.

#### Medication abortion

A recent change by the federal government could expand local access to one type of abortion.

For women who are still early in their pregnancies, a medication abortion — achieved

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by taking the prescription drugs mifepristone and misoprostol — is an increasingly common method. Planned Parenthood, which provides about 75% of the abortions in Oregon, said most choose medication abortions.

Last year, the Food and Drug Administration lifted a restriction on abortion pills, allowing patients to have telemedicine appointments with providers who can prescribe and mail abortion pills directly to them.

Before the rule change, the first dose of the two-medication regimen was required to be dispensed at a health care facility.

In Oregon, some health care providers have already been conducting telehealth appointments and mailing pills through the TelAbortion Project, a research project authorized by the FDA.

The federal agency decided to stop enforcing the in-person requirement in April 2021, and in December it was lifted permanently, allowing the pills to be mailed directly to patients.

Reproductive health care experts say the decision could make access to abortion easier, particularly in underserved places like rural Oregon.

Restrictions on abortion in neighboring states could draw more women seeking to end their pregnancies to Oregon.

Idaho has sought to enforce an abortion ban after about six weeks of pregnancy by allowing family members to sue abortion providers. The law is modeled after a similar law in Texas that was crafted to get around constitutional protections.

"What Idaho is going to do is really shut down access for people in Idaho with this new law," Udall said. "We believe that we will begin to see high percentages of people coming into Oregon."

A report by the Guttmacher Institute, a research and policy organization that favors abortion rights, estimated that even a 15-week abortion ban could mean a 234% increase in the number of people whose nearest abortion provider would be located in Oregon.

Given the reality of abortion access in Oregon and the anticipated demand coming from other states, Planned Parenthood is providing medication abortions by mail. People who live out of state can access the pills if they provide an address in Oregon or Washington state, which can be a friend's house or clinic.

#### 'A scary and stressful time'

If the Supreme Court overturns Roe v. Wade, as a leaked draft of a ruling indicated, more than two dozen states are likely to ban or significantly restrict access to abortion.

Oregon, Washington state and California have taken proactive steps to protect access.

The Reproductive Health Equity Act, passed by the Oregon Legislature and signed into law by Gov. Kate Brown in 2017, codified abortion into state law and required private health insurance plans to cover abortions with no out-of-pocket costs. The law also covers abortion services for undocumented immigrants.

Bracing for an influx, new legislation this year established a \$15 million fund intended to cover, in part, the costs for patients who travel across state lines and the costs for abortion providers.

In Astoria, news of the Supreme Court's potential decision ignited something in Johnsen. Fresh in her memory was her own abortion and the lack of local resources she encountered.

In a matter of days, she launched the non-profit Lemonade Foundation. She is still finalizing the nonprofit status, but the foundation's mission will be to help people who want to end a pregnancy through every step of the process: from scheduling appointments and organizing companionship so no one goes through a procedure alone to providing funds to cover things like transportation or child care.

Johnsen plans to reach out to other local nonprofits and find ways to connect with the people they see. She feels there are likely many in the community who don't know about the resources that are available to them or how to access those resources if they are considering an abortion.

"It can be such a scary and stressful time," she said.

With the Lemonade Foundation, Johnsen wants people who have chosen to or who need to end a pregnancy to know "that you are not just being denied care from every provider in our region. That there is someone here that is going to aid you with care and can connect you to care and be present for it."

This story is part of a collaboration between The Astorian and Coast Community Radio.

# **SignalViewpoints**

# LETTER TO THE EDITOR

# Appreciate writer's local flavor

We recently returned to Seaside after being away for a few weeks traveling. Our neighbor saved some of the Signals for us which normally pick up at Safeway.

It was nice seeing an article once again from the nephew of our beloved Claire Lovell (Dave Nelson). We originally met Mr. Nelson at a church event his aunt was at. Nelson actually wrote for the Signal in 2010 and during slow times, provided Blazers information in the sports section,

including quotes from players.

I see we missed an event featuring an author who writes books on the Blazers. What a fun event that must have been. I hope to find someone who may have attended and can tell me how it was. I'm guessing it was a lovely time enjoyed by all.

I hope young Mr. Nelson will consider writing more again and you publish them on occasion. It was nice having a local flavor on them.

Jim and Mary Everett Seaside

# PUBLIC MEETINGS

Contact local agencies for latest meeting information and attendance guidelines.

MONDAY, MAY 23
Seaside City Council, 7 p.m.,

989 Broadway.

TUESDAY, MAY 24

Sunset Empire Park and Recreation District Board of Directors, 5:15 p.m., 1225 Ave. A.

**Seaside Airport Advisory Committee,** 6 p.m., 989 Broadway.

# THURSDAY, MAY 26

**Seaside Budget Committee,** 6 p.m., 989 Broadway. (if necessary)

WEDNESDAY, JUNE 1

**Seaside Improvement Commission,** 6 p.m., 989 Broadway. **Gearhart City Council,** 7 p.m.,

THURSDAY, JUNE 2

www.cityofgearhart.com.

**Seaside Parks Advisory Committee,** 6 p.m., 989 Broadway.

# MONDAY, JUNE 6

**Seaside Housing Task Force,** 6 p.m., 989 Broadway.

TUESDAY, JUNE 7

p.m, 1131 Broadway.

Seaside Community Center Commission,

munity Center, 1225 Avenue A. **Seaside Library Board,** 4:30

10 a.m., Bob Chisholm Com-

**Seaside Planning Commission,** 6 p.m., 989 Broadway.



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