Local service offers best abortion advice

Lyn Whitley Feature Writer

"Unwanted pregnancy? Call this number for confidential abortion service." Several such advertisements are often run in the local newspapers. Yet how can the prospective patient be sure of receiving a low-cost, quality abortion?

"Use local counseling services," urges Robert Wilson, director of the UNC Human Sexuality Information and Counseling Service. "There is no need to seek help through agencies advertising in the newspapers."

As a result of the recent Supreme Court ruling that abortions must be free from state interference, more abortion clinics will be opening up, according to Wilson, "It is vital that people be advised of the extra fee often charged when seeking an abortion through referral agencies advertising in the papers," he said.

A recent study by Marion Johnson, a graduate intern working for the Human Sexuality Service, revealed that referral costs are charged by all abortion agencies advertising in the local media. According to Johnson, this extra cost is unnecessary. "The Student Health Service, Switchboard, District Health Department,

Human Sexuality Information and Counseling Service and the Student Health Action Clinic (SHAC) all have lists of accredited, licensed clinics performing abortions for the standard fees with no hidden extras and no middle man.

"No one nor any business should benefit financially from referring individuals to medical clinics," said Johnson. However, the results of her survey show that all the agencies advertising in the local newspapers between August and January 1973 were profit oriented organizations. One agency cleared a profit of over 300 percent on each referral.

In addition to the extra cost, she found other disadvantages for the prospective patient using these referral agencies. "There was no real effort to counsel the patient. I was not given the names of cheaper or local abortion services by three of the four agencies I called."

According to Planned Parenthood of New York, "Many commercial abortion referral services are not operated by individuals who are qualified to provide counseling or medical information."

Johnson reported this as being the case in two of the agencies she called. "The person answering the phone for one agency was caught up in a series of practical immediate questions. They were asked rapidly and impersonally, 'Are you pregnant? How many weeks? How much money do you have?'"

The source of the medical treatment was not revealed by three of the four agencies, according to Johnson. "The patient generally receives no information of practical value until she has paid the fee, which in all cases is paid upon arrival at the facility," she continued.

Many of the referral agencies, according to Wilson, do not explain to the woman the higher risks involved when performing an abortion between the 12th and 16th week of pregancy.

"Some referral agencies lead people to believe that it's all right to do abortions during these weeks," said Wilson. "But it is not general procedure for hospitals and gynecologists to terminate a pregnancy between the 12th and 16th week. The risk of complications increases during this time, so most doctors tell their patients to wait until after the 16th week., then they perform a saline abortion," explained Wilson.

"Because it is so hard to find a hospital or doctor who will take the risks of performing an abortion during this stage of the pregnancy, the referral agencies make most of their money from patients who do not want to wait until after their 16th week," Wilson continued.

The price of an abortion varies according to the length of the pregnancy, the facility where the abortion is done and the procedure used. For example, the standard fee for terminating a pregnancy before the 12th week is \$125 in most Washington, D.C. and New York clinics.

The procedure used (D&C or D&E) is performed on an out-patient basis at hospitals and may also be performed in clinics. "This type of abortion," said Wilson, "is considered by doctors to be a simple, safe and effective method."

Johnson found in her investigation of the agencies advertised in the local papers that all of them offered this type of abortion for more than \$125. The most expensive was \$400.

Prices were found to be consistently higher for abortions performed after the 16th week of pregnancy. The abortion procedure used involves a chemical injection which induces premature labor and requires a hospital stay from one to two nights. The costs vary according to the hospital rates and the profit percentage of the referral agency.

Because North Carolina Memorial Hospital is a public hospital, each patient is charged according to her financial status. Theoretically, it is possible for a woman to receive a free abortion at North Carolina Memorial.

However, a student being admitted to the hospital who is supported by her parents is evaluated on the basis of her parents' income. This usually means the cost will be much greater than she can afford if she does not have her parents' financial help.

If the student does not want her parents to know she is pregnant, she has two alternatives.

First, she can go to a clinic or hospital in either Washington, D.C. or New York, or even another hospital in North Carolina, that offers treatment for deferred payment. The Human Sexuality Information Service has a list of places which offer this type of payment plan.

Second, the woman who goes to NCMH may choose to have a prostaglandins abortion. This treatment is still in the experimental stage, which means there is no charge to the patient. According to problem pregnancy counselor Emily Kenan, "A prostaglandins abortion is perfectly safe. We have had nothing but positive reactions from all the women we have referred to this service."

She explained, "The patient stays in the hospital for three to five days in a private room with the best care available—all for free." She described the experimental treatment as similar to the more common saline abortion in that it induces premature labor.

The benefits of using a local abortion referral service are evident in terms of dollars and cents, but what about the individuals' psychological health?

"When a woman is faced with an unwanted pregnancy she needs to think through all the alternatives available to her," said Johnson. "She needs to talk with someone interested in her particular situation who can offer objective information and guidance. No phone call can accomplish this," continued Johnson.

None of the abortion referral agencies contacted offered post-abortion counseling, according to her report. "Once her decision is made, the patient needs to have available follow-up personal counseling (including contraceptive information)—not a long-distance phone call," concluded Johnson.

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