

POLITICS AND MORE PODCAST

ABORTION AND THE POTENTIAL “CRIMINALIZATION OF PREGNANCY” IN THE U.S.

*Jia Tolentino and Stephania Taladrid on the confusing and chaotic post-Roe
landscape.*

With Tyler Foggatt

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Last week, the Supreme Court overturned Roe v. Wade, the 1973 landmark decision that established a constitutional right to abortion. Although this outcome had been anticipated for months—for years, even—it has had an immediate, visceral effect on abortion providers, those seeking abortions, and the nation at large. In some states, abortions stopped overnight; in others, there’s widespread confusion over what qualifies as legally acceptable circumstances for having an abortion. As states move to either outlaw abortion or codify it, the larger political question of “What next?” looms. The *New Yorker* contributing writer Stephania Taladrid and staff writer Jia Tolentino have both reported extensively on abortion access in the United States. They join the *New Yorker* senior editor and Politics and More guest host Tyler Foggatt in a conversation that has been edited for length and clarity. “Flat out, women will die in the course of ordinary pregnancy because of physician fears of doing anything that might make them liable for felony charges of

performing an abortion,” Tolentino says. “It will make pregnancy significantly more dangerous for many, many people.”

Foggatt: Steph, you just got back from Houston, where you were reporting on the largest abortion clinic in Texas on the day that the Supreme Court decision came down. Can you take us through what you saw there?

Taladrid: Definitely. So the reason why I wanted to be in Houston is because, contrary to a city like McAllen, which is in the Rio Grande Valley—and where women and pregnant people have already seen and experienced what a world without Roe looks like—Houston has always had a real infrastructure for abortion care. There are several providers there, and I think it’s a place where people have come to rely on those providers for a very, very long time. So we were interested in being in a place where people knew that they could turn to—and suddenly seeing just how all of that infrastructure, whether that was abortion providers or abortion funds, just completely vanished from one day to the next. We came into the largest clinic in the state, and it was interesting to see that the staff there were practically going on with their daily routines, knowing that every day that they worked at the clinic could be their last. And, far from a sense of resignation, there was this deep awareness that the faster they worked, and the more patients they could see, the more people they could help.

That morning at the clinic felt like any other morning, except that, every time that the staff engaged with the patients, their interactions came with a disclaimer. It was, “Welcome. Good morning. Show me your I.D. Fill out this form. And, by the way, the Supreme Court can, at any point today or tomorrow, overturn the constitutional right to an abortion, which would mean that we will not be able to serve you.” And so what was interesting to see was that a lot of people weren’t even aware that that was happening. And that, I think, made it all the more tragic when the decision was finally announced,

because the decision came shortly after 9 A.M., and several members of the staff were kind of huddled in the front-desk area, and the reactions were dramatic. People started crying. People were just in complete disbelief of what was happening. And then, at some point, a patient comes up to the clinic director and says, “Why are you all crying?” And then she kind of had to put herself together and swipe away her tears, and go up to the patients who were waiting in the waiting room and say, “Ladies, the Supreme Court just struck down *Roe v. Wade*, meaning that we can no longer operate as an abortion clinic, and we will not be able to assist you today.”

I was struck by a Cuban woman who spoke no English, and she couldn’t really understand what was happening. And, at one point, she turns to the clinic director and says, “*¿Qué pasó?* What just happened?” And then someone explained to her what had happened, and then she just left. And many of the other patients, the minute that the decision was announced, they just fled the clinic.

Foggatt: Because they were worried about getting in trouble just for being there?

Taladrid: Potentially. I mean, who knows? There are just so many reasons why that could have been. And, to me, what was most striking was just seeing the enormous distance separating what was happening in D.C. and the reality on the ground.

Foggatt: So, Jia, you grew up in Texas. Can you talk a little bit about the cultural attitudes toward abortion that you observed long before this?

Tolentino: Yeah. I grew up in Texas—in Houston, actually, where the clinic that Stephania just visited is located. And I don’t think I knew a single person that was not anti-abortion until I went to college, really. But I also think that the anti-abortion movement that has entrenched itself in half the country and

that has become victorious in half the country is one that is significantly, markedly more extreme than the one that was dominant in the eighties and the nineties. This is an anti-abortion movement that has been as radicalized as the G.O.P. has since 2016. There are at least eleven states that have no exceptions for rape and incest, which is previously an unthinkable level of extremity and cruelty.

The people that I grew up around, they talked about abortion as murder. There was this doctrine that life begins at conception, that abortion is killing a baby. But I think that, when it really came down to it, abortion was not actually instinctively tantamount to murder. There was an understanding that there was a loss in abortion, but that there was not actually a reason why you would deny a pregnant person chemotherapy because she was pregnant. That you would refuse someone care for a septic uterus because you would have to stop the fetus's heartbeat first. I think that the true implications of fetal personhood, which is what this current anti-abortion movement has organized itself around—the idea that effectively the fetus is the kind of person with rights that are not only equal to but really far superior to any that any of us enjoy, the right to make someone die so that you can live—is significantly more extreme than any of what I grew up around, and that was already quite extreme.

Foggatt: Yeah. It seems like there's been a real shift. I was thinking about S.B. 8, which is the Texas law that bans abortion after six weeks of pregnancy. That allows private citizens to go after abortion providers and people who aid and abet those seeking an abortion—like the Uber driver who takes you to the clinic—but that law technically doesn't hold the person who got the abortion liable. And then, in 2014, Tennessee passed what was the first law in the United States to allow women to be prosecuted for drug use during pregnancy, but even that was discontinued after a couple of years. So it seems like there has been sort of a hesitation up until this point to actually go after the women who are getting the abortions, even if you're indirectly going after them by making it

harder for them to get the procedure. But now you're seeing, in states like Wyoming, that they're looking to pass their own versions of the Tennessee law. So, basically, going after women for this idea of fetal endangerment.

So I'm wondering if you guys have any thoughts on the exact point at which the pro-life movement pivoted to the criminalization of people who are getting abortions or pregnant people, rather than going after the doctors or the people who are sort of surrounding the procedure.

Tolentino: It's true that currently the anti-abortion movement is sticking to the idea that there'll be mercy for wayward mothers, but this, I have a strong feeling, is a veil that will fall soon enough, because progressive states are passing laws that will shield women and doctors from out-of-state prosecutions, black medical records, et cetera. And once you can't target people out of state—once you can't target doctors effectively for providing abortions—the only people to target to stop abortions will really be the people who are getting them. And there are a lot of people who have felt quite surprised by this, where, in fact, the people in the reproductive-rights community in Texas, for example, have known that this moment was coming with absolute certainty, I would say, since about 2011, when the Texas state bans began passing that were then replicated in so many other states around the country.

And, in terms of the criminalization of pregnancy, the National Advocates for Pregnant Women have done uniquely valuable work on this. And they started tracking—I think from the seventies to the mid-aughts, there were almost two thousand prosecutions of pregnant women over behavior that they took while pregnant, or were suspected to have taken while pregnant, that could be considered dangerous to a fetus. These were women that were prosecuted for drug use even if they delivered a healthy baby, people who didn't disclose prescribed medications till their labor. There's been a myriad of charges. There's child endangerment, there's possession and distribution of narcotics to a minor.

There's manslaughter charges in some cases of stillbirth, even when no causal link could be drawn between the actions of the pregnant person and the stillbirth itself.

This has been a tactic that has been tested on low-income women, on brown and Black women, since the eighties, really. I would say that's when it really started. There were hospitals in South Carolina that were drug-testing women at labor secretly and then charging them. And it has been pretty successful because even those of us who have defended reproductive rights have tended to think of these cases as outliers. I think we are in an era now when we will see they were not the outliers. They experienced what is coming for a lot more people.

Taladrid: I would argue, too, that with S.B. 8 and, previously, as Jia pointed out, this is something that has been a long time in the making. This is not S.B. 8. This is not the Supreme Court's decision on *Roe v. Wade*. It's every single law that legislatures around the country have passed to make it harder for women and pregnant people to access abortion care. And, ultimately, regardless of whether the woman or the pregnant person is criminalized or not, at the end of the day, these kinds of laws fundamentally affect them. If providers are no longer there to offer that care, and if, on top of that, all of the actors who are supporting that world—whether that's abortion funds, or activists, and hotlines, and all of that—if none of those can continue to operate, then where will women turn? And it was interesting because at the clinic, obviously, the question was: what do I do now?

The staff handed over a form that they had put together with the National Abortion Fund's phone number. And it listed a series of options they could turn to in a world where *Roe v. Wade* had not been overturned. And it listed three abortion funds in the state of Texas that, the minute the decision was announced, went dark.

It was just so palpable to see that ultimately the answer was, there's nowhere to go unless you can afford to go to another state. And here, I think it's very important to think and consider that half of abortion recipients in the country have incomes below the federal poverty line. And so we need to start thinking about the women who won't be able to afford to go to New Mexico, or Colorado, or Maryland, or whatever it is—to any of the sixteen states plus D.C. that have laws protecting abortion rights. Not to speak of the undocumented women who also cannot afford to just take a car and make it through the dozens of internal checkpoints that exist inside of Texas. Again, criminalization is important, but I think we need to look at the exclusion that comes with these kinds of laws.

Tolentino: Also something that I've been thinking about a lot is this is happening at a time of a national formula shortage. We already live in a country where, I think, one in three families struggle to afford diapers; where, after the pandemic, child tax credits were taken away. There was just this massive resurgence of the kind of child hunger and poverty that defines America and defines it for the majority of people who already get abortions, who are already mothers, who already know what it means to love and care for a child, and who are seeking abortion care out of hope for the kind of families they hope to have, where you won't have to stretch a diaper over twenty-four hours or put paper towels in a plastic bag—which is what so many people have to do.

And, as Stephania was saying, these are the people that we're talking about that will not be able to get abortions. And, in terms of what Stephania was saying about what do we do once these networks disappear that know who to connect you to, who can host you along the way, and who can help you travel. These will also affect women, low-income women in particular, but all women who have wanted pregnancies that experience unexpected complications; women that had every intention of carrying their pregnancy to term but need to save their own life—a procedure that qualifies as abortion. And they will have to

travel along these interstate covert networks. These networks have existed for a long time; they will continue to exist. But, as we saw in a legal climate like Texas, where there are bounty targets twenty-four hours a day, those support systems can vanish in a second.

Foggatt: So how hard is it to distinguish between an abortion and a miscarriage? Is this the kind of thing where a doctor can step in and say, “This is very obviously an unintentional miscarriage rather than an intentional abortion”?

Tolentino: Abortion and miscarriage are both incredibly common; both occur about a million times per year. And, in many cases, they’re clinically indistinguishable. If a woman’s uterus expels its contents, there is no sort of instant test to distinguish whether it was a deliberate miscarriage or a natural one. On the one hand, this is helpful for people who will be seeking abortions and getting them. There is no obligation for them to walk into an urgent-care facility and say, “I took misoprostol and I think I might be bleeding too much and I would like to have an exam.” They don’t need to do that. And, in fact, they should not. However, what that also means is that women who are experiencing miscarriage naturally, who walk into an urgent-care center and say, “I miscarried. I’m at twelve weeks and I think I might be bleeding too much,” under certain hospitals, under certain district attorney’s jurisdictions, that miscarriage can and will be investigated as the possible crime of abortion. So the indistinguishability of these two incredibly common events—on the one hand, it is a shield for women seeking abortions, and, on the one hand, it is a cudgel toward women who miscarry.

Foggatt: And how do you expect this to affect the care that pregnant women receive?

Tolentino: What all of these restrictions do is they present a legal framework

for charging and detaining women for doing anything that could possibly cause a miscarriage, that could be seen to cause early labor, to cause a stillbirth. It will have an incredibly chilling effect on prenatal care in prohibition states. Right now, most of the charges for child endangerment while pregnant have come from drug use, but there are plenty of other things that pregnant women are told they are not allowed to do because it will endanger the baby, like taking hot baths, and exercising too much, and eating deli turkey, and all of these things—travelling, working a certain kind of job. The inevitable effect is to set people in an adversarial relationship with their own pregnancy, which has happened in states like Tennessee with things like the Fetal Assault Law, which was discontinued precisely because it caused an increase in maternal and infant death.

You will see many, many, many stories of people who experience pregnancy complications. And the doctor will need to do hours of judicial review to make sure that they can't get sued for providing any procedure that might endanger the fetus, and women will die because of it. Flat out, women will die in the course of ordinary pregnancy because of physician fears of doing anything that might make them liable for felony charges of performing an abortion. It will make pregnancy significantly more dangerous for many, many people.

Foggatt: Tennessee, at least, seemed to realize the error of its ways because it passed this law in 2014, and then, two years later, they sort of went back on it. Is that a reason to be optimistic that some lawmakers might realize actually that these laws aren't a good idea, that they're going way too far by essentially criminalizing pregnancy?

Tolentino: Tennessee is not as hard right as many of the states that have passed total or near-total bans. I think that we haven't yet seen the extent to which people who even maybe consider themselves anti-abortion—certainly conservative people will understand the ramifications of this, that it means

more than sort of an affirmation of the unborn. It actually means severe consequences for them in their communities and an increase in maternal mortality and all these other things. But another counter-example is Texas. Texas has one of the highest maternal mortality rates in the country, and it also has led the field in terms of abortion restrictions. I think that the causal relationship between all of these things is obvious if you want to look at them, but I think it's quite easy to ignore if you have a state legislature that's not interested in protecting the lives of women.

Taladrid: I think, if anything, this will only embolden them. It was striking to see, the next day when I returned to the clinic in Houston, that not only was it empty, but Ivy, one of the staff members, was very concerned about the picketers who went up to the clinic every single Saturday and got incredibly aggressive with the patients and with the staff. And she feared that, in the wake of the Supreme Court's decision, they would become all the more aggressive. And the opposite happened. A couple of them showed up—they were carrying a cooler with some beers. They were kind of celebrating and cherishing and enjoying this moment. So I think that it's unquestionable that, for them, it's a win.

We need to think about just the precarity of care in Texas and in all of these states. Because we talk about abortion, but so many of the women that I met at the clinics—whether that was in the Rio Grande Valley or in Houston—many of them don't have a health-care provider, many of them don't have a gynecologist that they regularly see. Many of the laws that legislators there have passed have led to that erosion in women's health care and reproductive care over the years. And, to think of this country as a First World country, when it's now become one of the few nations that have retracted those rights, along with Poland and Nicaragua—we're in the company of those countries now. It's just absolutely devastating, and such a historic reversal.

Foggatt: You mentioned that this is a win for the Republicans, but I’m wondering to what extent this is more a failure of the Democratic Party that sort of had a chance to enshrine abortion rights and law and didn’t take the opportunity. Do you guys have thoughts on how the Democrats failed to respond to the threat to abortion rights in the Biden Administration and even before that?

Tolentino: Oh, I have so many thoughts about this. I have thoughts about this that I think would require a lot of bleeping. I’m not enamored of Democratic Party leadership and can’t think of a single time in my lifetime when I have felt that way, but, when the decision came down and we saw what the Democratic Party leadership had to offer, that was a moment for me when I began to genuinely suspect for the first time in my life that, actually, the Democrats are not interested at all in protecting the right to abortion. It was presented on the day as nothing but a reason to get people to donate, and that I found so abominable. That repro activists have been preparing for this moment for a decade. We knew for a fact that it was going to happen in 2018, once Kavanaugh was confirmed, and then an extra layer of “absolutely this is going to happen with Amy Coney Barrett.” The Democrats have sat by, even before this, while abortion was basically made inaccessible to poor and minority women in many states in the South and Southeast over the last decade.

Every candidate campaigns on making Roe the law of the land. And then, as soon as they get elected, they back away and focus on things that they consider more important. I’m sure, Stephania, you’ve seen it in your reporting—the people that we’ve been in contact with, who have been laying the systems of protection in place, just these tiny threads of connection and support, person to person, with so little funding, with so little anything, other than the will to help people—

Taladrid: And so much risk.

Tolentino: —and so much risk to themselves. The way that they have been doing this for years, the way that everyone knew that this was coming—who had even been paying the tiniest bit of attention—and then Nancy Pelosi read a poem. I wasn't expecting the Democrats to override the filibuster and codify Roe if they weren't going to do it for the Voting Rights Act, but the fact that, even now, there's been no central message but "Donate and vote in November"—it has filled me with a level of, honestly, rage that I have not felt at any point that I can remember. And it makes me feel that, in fact, these egregious moves on the part of the Republican Party that are devastating the lives of so many people around the country, permanently changing their families, permanently putting people in poverty for the rest of their lives—that the Democrats are primarily interested in using this as a fund-raising opportunity; that, in fact, the only way they're presenting this is: how can we have this serve us—as you can tell, I've been incensed about it.

Taladrid: And it was interesting, as Jia pointed out, the main message that we got from the President that day was "Roe is on the ballot." I think the reaction for a lot of people was, "How can you be telling me that the answer is to vote when we already voted you into office? You're there." And it was interesting to see—after the decision was announced, I went up to a small rally that several of the staff members at the clinic attended. People were rightly upset, and they were shouting, "Hands off our bodies" and "We won't go back" and "Fuck Greg Abbott," the governor of Texas. And then, at one point, Beto O'Rourke showed up. There were some among the crowd who wanted to hear from him; the majority did not. Then the chant became "Democrats, we call your bluff." And what was good to see was that, instead of running away from that criticism or just going on CNN and finding another kind of podium, Beto stayed and he listened to people's abortion stories.

He wasn't hoping to co-opt that moment and to take the mike away from the women and the pregnant people who were hoping to express their anger, and

their frustration, and their fear, frankly, for their lives and those of the generations to come. But he stayed and he listened as a way to show to them: I'm here, and I stand with you. Within the Party itself, we've heard proposals to build abortion clinics on federal land, to fund people seeking abortions out of state, to expand the Supreme Court's membership. And, in a way, I think, it's been quite underwhelming to see that the White House's response has been, "Well, we'll protect the right to seek medical care. And we stand with the Attorney General who has said that no state can interfere with a woman's ability to travel to another state." We have yet to see whether that's true or not. But then that doesn't solve the issue of what happens to those who, again, cannot afford to travel anywhere else.

Tolentino: Even from a purely cynical election-winning perspective, I don't understand what they're doing right now—anything that would make anyone who cares about this feel that there was any sincere desire to protect the right to abortion and to pass something that would, at a policy level, protect women from being sued over these things. But the thing is, it's like we shouldn't even just have been hearing this since last Friday. We should have been hearing this since, at the very latest, the end of 2021. There was plenty of time to establish abortion clinics on federal lands. There was plenty of time to protect against what has been a conservative promise since Trump was elected. There's this idea that the Republicans, they're the ones that steal Supreme Court seats and block appointments; we could never stoop to their level. And this is exactly how we've got to this place. That Biden won't even discuss the possibility of expanding the Court; won't even touch the obvious illegitimacy of the Court, where most of the Justices were appointed by a Party that hasn't won a popular election once in the last thirty years or whatever it is. And the fact that even these talking points, that these things are just so anathema to these propriety-obsessed Democrat leaders. All of the mobilization, all of the courage around this—it is all coming from people on the ground. It is all coming from the

bottom up. There is nothing coming from the top down—A.O.C., Elizabeth Warren, a few people excepted. I wish that they even had a strong position that they were wavering from; they've got nothing for us but "Vote and donate."

Foggatt: Thinking about pro-choice rhetoric, I'm wondering what you guys think is the most effective tactic here. In the aftermath of the decision, on Twitter half the tweets were sort of focussing on abortions for people in medically risky situations, like someone who has an ectopic pregnancy. And then the other half of the tweets were more focussed on the idea that an abortion should be mundane. That anyone should be able to get one for whatever reason. It seems like the former would more obviously sway pro-lifers, but do you guys have thoughts on sort of what the focus should be if we're looking for a unified message for the pro-choice movement?

Tolentino: In actuality, I think that all of these approaches are necessary. I grew up in Texas around people who consider themselves pro-life. I think that there are some people who do need the sympathetic—this is what happens in ectopic pregnancies, this is what happens with miscarriage management. I think that those are important, not just strategically, because those are real cases. That is how a lot of people come to the experience of abortion; that matters. Having grown up being taught that abortion is murder, I personally believe that it should only be regulated by the medical code. That the criminal-justice system has no role whatsoever in regulating abortion, and that it should be regulated only by medical ethics and medical regulations. And that's a radical stance. That's a stance that people are afraid to touch, to look at in non-reproductive-justice circles. But I think the messaging that abortion should be safe, legal, and rare; this idea that it's an unfortunate tragedy that people have to get when life has treated them badly; and it's such a shame, and they have to be of the utmost sympathy to justify this dangerous and heavy act—I think that kind of messaging has been very, very, very common on the left, especially in the center left, and I think it has walked us exactly where we are today. The

only way forward is to defend it as full-throatedly as the right wanted to ban it. And it is, I think, also the left's shyness about the full-throated defense of the lives and the self-determination of poor people and Black and brown people that has also led us here. So, in general, I don't think there's a way out of this without people embracing messaging and a standpoint, a real political standpoint, that is currently painted as radical but is going to be the only way to make life humane and livable and in any way just in this country.

Taladrid: I think economic justice here is key. If we really want to get into the politics of this, voters are thinking about inflation, rising gas prices. All of these factors that are just making your day-to-day living in this country harder. And if, on top of that, you'll have to spend all of your savings or the money that you don't even have to get an abortion out of state, it's just completely insane. There was an interesting study that showed and established a very clear link between carrying an unwanted pregnancy to term and living in poverty.

Tolentino: The Turnaway Study.

Taladrid: Exactly.

Tolentino: Yeah.

Taladrid: And it found that women who were denied an abortion they had hoped for were almost four times more likely to fall below the federal poverty line than women who had received one. And we did a story on a family from Dallas who had to travel from Dallas to New Mexico, to a city called Santa Teresa, so that their eighth grader could get an abortion. And the family had fifteen hundred dollars left in savings. They'd just put in a down payment for a house that they had worked pretty much their entire life to be able to afford. And they were suddenly faced with a cost of thirteen hundred dollars to get an abortion. And I followed this family. I met them at the clinic in New Mexico, and I followed them back to Texas. And just the sense of anxiety, the dread,

and the fear—genuine fear—of thinking, Where do we go from here? We have two hundred dollars left in our savings account. This just completely depleted our savings. Again, I think that it wouldn't hurt for the Democrats to be thinking about those families and to be thinking about those mothers. And I use the word "mothers" because I think it's important for us to remember that most of the people who seek an abortion are already mothers—they're parents. In many cases, the decision to get an abortion is an economic one, because they cannot afford to have a second, third, or fourth child.

Tolentino: You talking about this is another reminder that the people making these laws are so incredibly distant from the reality of what it would be like to have fifteen hundred dollars to your name in all the world that you spent twenty years making, and to have one trip be able to wipe that out. I would venture that there is really no one making policy in this country who understands what that feels like, and we're seeing the results of that.

Taladrid: Exactly. And not only that. The women that you hear from—I remember there was a mother of two who worked the night shift at a medical lab and her hours were just completely insane. She went in to work at midnight, came back home at seven to prepare breakfast for her child, then slept from 7 A.M. to 3 P.M., woke up to help the child with homework, went back to bed, and then went straight to work. She was in a position to say, "I can't even take care of the two children that I have." Again, it's not only what it costs to get to the clinic. It's everything that you need to do for women who cannot afford to take any time off of their work, for women who don't have anywhere to leave their children for child care. Again, so many basic things that people can't even rely on anymore.

Tolentino: I also think it's one of the most wild failures of Democratic leadership right now that they are not trying to ram through all of these policies that conservatives are purportedly saying, "We do need to offer little bit

more support to pregnant women and new mothers.” The fact that there is not a targeted unequivocal push toward universal health care, family leave, federally subsidized child care—all of these things that would make family life far less punitive for so many people—that there’s been essentially no conversation about that at a moment when, at the very least, you could, even at a state-by-state level, at a municipality level, you could hold people to something like that right now. There’s not even an attempt to do it.

And I also wanted to bring up: the two of us have been using interchangeably “pregnant people” and “women.” As much as I’m also thinking about trans people, it’s because there are so many people who get pregnant who are not women because they’re girls. As you were saying, the girl you reported on, she was fourteen. That’s not a pregnant woman. She’s a girl. She’s a little girl. And I think the reality of children—the American Association of Pediatrics had to issue a statement on the medical dangers of forcing a child to give birth. That’s one other way in which not all people who are pregnant are women.

Taladrid: One thing that I think about, too, is: what is this doing to us as a society? Take S.B. 8, for instance. When I was reporting from the Valley, back in December—this was just a couple weeks after S.B. 8 had passed—I was struck by just how effective the law had been at silencing people. It was just so incredibly hard to get people to open up and talk to you about it. Their livelihoods and their jobs were on the line. If they were doing something to help a woman or a pregnant person, they weren’t going to share it with a reporter. And S.B. 8 has an incentive—as you pointed out, Tyler—the aid-or-abet provision in it that allows your neighbor, that allows anyone who is suspicious of whatever you’re doing to help a woman get an abortion. And that incentive allows them to get rewarded for it. And I fundamentally think, What is this doing to us, if you can’t even trust your neighbor, if you can’t even trust the people that you talk to?

In the case of the teen-ager that we were just talking about—her name obviously does not appear in the piece; everyone in her family is kept anonymous—people from her own family don't even know that this happened. Just the stigma around something that, again, is women's health care, not to talk of the mental-health implications that the anti-abortion rhetoric, that these laws have on a fourteen-year-old who feels like suddenly the entire country is conspiring against her and judging her for the very basic decision that she took to not be a mother at the age of fourteen.

Tolentino: Part of what makes this so unwieldy and overwhelming is that abortion is connected to all of these issues. It's something that feels really overwhelming to me a lot, but also reminds me that what we're talking about here is the ability to make a life. And I'm not talking about fetal life. There is perhaps no more fundamental issue to any sort of human autonomy, to the narrative control of your aspirations, to the fulfillment of your hopes, to your ability to feed your family, to your education, to everyone else's lives and your family and your community. It's at the nexus of every single issue because every person—we are all the product of reproductive decisions or the lack of them. It is the fabric of our politics. It's the fabric of our everyday existence—how people choose to, are forced to, are constrained while, are punished while trying to live a life and have a family. It's all there is. And the difference between these choices being forced and these choices being free is in many ways the entirety of what we're talking about.

When we talk about policies that would improve this country, we're talking about policies that would improve the population's ability to make free choices and to live in ways that are decent, and abundant, and loving, and free. And there's nothing that breaks that desire and that ability like pregnancy before you're ready or when you're not able, for any of these reasons. The fact that abortion is tangled up with everything feels really daunting to me, but it also reminds me that all of the political things that I care about, they're all

connected. That economic justice and racial justice and immigrant justice—it’s all wrapped up in abortion and abortion is wrapped up in everything else. Stephania, I’m sure you’ve had a lot of friends texting you. It’s, like, “What can I do? What can I do?”

Taladrid: Right.

Tolentino: Because there’s too much to do. There’s too much. It feels really overwhelming. And I keep telling people, “Just remember, all of these things are connected. All these forms of justice are connected. And, if you find one thread to pull and just keep pulling it, that’s what we have to do.”

Foggatt: Thank you both so much. ♦

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