

Getting the Edge: Communicating and Winning on Reproductive Freedom

Emboldened by the U.S. Supreme Court overturning *Roe v. Wade*, federal and state lawmakers hostile to reproductive freedom have ramped up their efforts to block access to abortion through a barrage of bans and restrictions. In the wake of this extraordinarily unpopular decision, Republicans are now ignoring the will of the people to advance their extreme anti-freedom agenda.

Despite Americans voting overwhelmingly in support of abortion rights during the 2022 midterms, conservative legislators continue to push legislation and policies with the ultimate aim of banning abortion everywhere. Bans, even with so-called exceptions, put pregnant people and their families in harm's way and force them to navigate legal, administrative, and judicial barriers to access life-saving care. Leaders must speak out with powerful, proactive messaging that engages the vast majority of Americans who support reproductive freedom and pushes back against rampant disinformation from the anti-choice movement and politicians.

The following memo, based on NARAL Pro-Choice America's [multi-year message research findings](#) and opposition monitoring program, provides recommendations for owning the narrative and responding to false anti-choice claims.

OWNING THE NARRATIVE

Shape the conversation around powerful values, freedom vs. control:

The freedom to decide, especially as a direct contrast to controlling politicians, provides a powerful and uniquely effective framework for conversations around accessing the full range of reproductive health care in the United States.

- *When it comes to decisions around parenthood and pregnancy, I will always respect people's freedom to make personal decisions and protect the freedom to decide.*
- *I, like most Americans, believe that personal decisions about pregnancy should be made by the pregnant person, with the support of the people they love and trust—not by politicians trying to control us.*
- *I believe that the decision to have an abortion is not a political one; it is a deeply personal one. As a legislator, it's not up to me to force someone to make one decision or another—we should be helping people, not trying to control them.*
- *The reality is that every pregnancy is unique and complex. That's why one-size-fits-all bans and restrictions on abortion endanger pregnant people and prevent doctors from providing the best health care to their patients.*

Drive empathy with a broad range of stories that demonstrate the realities pregnant people face:

- *No matter where a person lives, what they look like, or what they do, every person's life has its own unique circumstances. People, not politicians, should be able to make their own decisions, including when it comes to abortion care.*
- *We may never know the full scope of what they look like, or what they do, every person's life has its own unique circumstances. People, not politicians, should be able to make their own decisions, including when it comes to abortion care.*
- *People who are denied abortion care are more likely to face economic hardship and insecurity, more likely to have serious health problems, and their children's well-being is negatively impacted. People who can get the abortion they need are more financially stable, raise children under more stable conditions, and are more likely to have a child when they are ready.*

Call out anti-choice politicians, and demonstrate the danger of their agenda:

- *We are supposed to be passing laws that help people. Yet these abortion bans aren't helping anyone—these bans are being used to control and manipulate others for political gain, power, and self-interest and have devastating real-world consequences.*
- *The Republican Party is going against the vast majority of voters by trying to force endless, harmful restrictions and bans on abortion care. Anti-choice politicians want to control people's decisions and criminalize doctors who provide care for their patients.*
- *Abortion bans and restrictions are un-American. This country is supposed to be about having the freedom to make your own life.*
- *Have Republicans ever thought about what abortion restrictions mean for people's lives? Some of these laws force doctors to lie to their patients; others could put someone in jail after having an abortion or miscarriage. These laws aren't about protecting people; they're about controlling them.*
- *The people passing abortion bans don't care what happens to babies after they're born. These are the same politicians who want to cut assistance programs like early childhood education or food stamps.*

KEY LANGUAGE

Defining our Side and Describing our Values	Describing Restrictions and Defining the Opposition
<ul style="list-style-type: none"> • Reproductive freedom • The freedom to decide • Personal decisions • Empathy and compassion • Safe, accessible, supported • Equity and justice 	<ul style="list-style-type: none"> • Controlling • Invasive/Intrusive • Politically motivated • Political interference • Self-interest and political gain • Taking away options • Criminalizing doctors and patients

RESPONDING TO OPPOSITION CLAIMS

Note: When responding to opposition claims, do not accept their inaccurate or bad-faith premises. Instead, pivot to correct information and lead with your values. Then, re-center the pregnant person and their lived experience while calling out your opponent’s selfish, politically-motivated agenda.

Claims about the safety of medication abortion care

Now that the Supreme Court overturned *Roe*, anti-choice extremists and their political allies are ramping up their attacks on medication abortion in order to push abortion care even further out of reach. These bad actors rely on inaccurate language, calling medication abortion care “chemical abortion” and spreading disinformation—calling it “unsafe,” and claiming it is “trafficked” and sold over the counter—in order to scare and confuse people seeking care. In place of repeating these falsehoods, it is vital to respond with proactive, science-based messaging on medication abortion.

- Medication abortion care is a safe, effective option for ending an early pregnancy. It was approved by the U.S. Food and Drug Administration (FDA) more than 20 years ago.
- Medication abortion is prescribed under the care of medical professionals for patients who need it. But with states now banning medication abortion care, doctors and pharmacists are reluctant to prescribe and distribute these medications, even to treat miscarriages, for fear of losing their license—or even going to jail.
- Politicians should not be allowed to substitute their political agenda for the FDA’s scientific judgment and decision-making authority over the availability of safe and effective medications, including medication abortion care.
- People seeking abortion care should be able to have medication abortion prescribed by their health care provider and then be able to receive their medications in the way that makes the most sense for them, whether at a health center, local pharmacy or delivered to their home.
- Anti-choice lawmakers have been ramping up their attacks on medication abortion access in a desperate bid to retain power and control. The unrelenting efforts by these bad actors to interfere with, restrict, and ban medication abortion care are part of anti-choice extremists’ agenda to end legal abortion.

Claims about infanticide, “born alive” legislation, “partial birth abortion,” and abortion “up until the moment of birth”

The anti-choice movement makes a range of false and inflammatory claims about abortion later in pregnancy, often conflating it with “infanticide” and parroting inaccuracies about the frequency and circumstances surrounding these abortions. The opposition falsely asserts that advocates want abortion “up until the moment of birth” to justify their so-called “born alive” legislation.

They have used these outright lies and disinformation to discredit critical legislation like the Women’s Health Protection Act, which would protect abortion rights and access throughout the country. This is not how reproductive health care works, and these claims push a false narrative to distract and mislead voters. It is critical to quickly correct disinformation, state the facts, and re-center empathy and compassion for the pregnant person.

- **Quickly correct disinformation/misinformation:** “This is incorrect. That’s not how medical care works. ...”
- **Call out the motivations of those spreading disinformation:** “That disinformation is being spread by people whose goal is to interfere with people’s ability to make personal medical decisions.”
- **Lead with values:** “Most of us try to live our lives without interfering in other people’s personal decisions. We know that someone may end a pregnancy for different reasons. We cannot make their decisions because we haven’t walked in their shoes. Someone might face a web of barriers—including restrictions, travel distance to a clinic, or not being able to afford care—that can push abortion care out of reach or later into a pregnancy.”
- **Center the pregnant person:** “Sometimes, someone gets a tragic diagnosis of a serious health complication that threatens their life or health. Other times, a family learns later in pregnancy there is a very serious fetal diagnosis, or the pregnancy is not viable. When families are making difficult, complicated, personal medical decisions, one-size-fits-all laws don’t work.”

Claims about “crisis pregnancy centers” and “maternal health centers”

Anti-choice politicians continue to offer their so-called “crisis pregnancy centers” as a supposed alternative to abortion care. These fake health centers exist to push anti-science propaganda and medically inaccurate disinformation about the risks of abortion under the guise of health care. Fake health centers trick pregnant people by masquerading as legitimate reproductive health care clinics and then intentionally lying to, shaming, and misleading those seeking abortion care. Their dangerous and coercive tactics put pregnant people at risk.

- *These fake health centers claim to “protect women” but, in reality, push disinformation and a political agenda onto pregnant people in order to dissuade them from seeking abortion care. Despite claiming to be “pro-family,” these centers use deceptive and dishonest tactics that prevent people from making the decisions that are best for them and their families.*
- *As the American College of Obstetricians and Gynecologists has repeatedly stated, there is no evidence whatsoever to support the medically inaccurate and deliberately misleading claims about the safety of abortion care that these centers use to shame and mislead those seeking care.*
- *Decisions about pregnancy are time-sensitive and deeply personal, and a pregnant person’s health and well-being should always come first.*
- *Everybody deserves access to the medically accurate, comprehensive, and unbiased information they need to make personal decisions about their lives, bodies, and futures—not disinformation and manipulation by those in fake health centers trying to stop abortion care.*

Don’t Repeat...	Instead Say...
Chemical abortion	Medication abortion
Infanticide, partial birth abortion, abortion on demand, abortion up until the moment of birth	Abortion later in pregnancy
Pregnancy care centers, maternal health centers, crisis pregnancy centers	Fake health centers