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Crafting a Persuasive Argumentative Essay

WRIT 2500

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Abortion—the Double-Sided Story

With the legalization of Abortion in 1973 after the U.S. Supreme Court decision of Roe vs. Wade, there came a lot of controversy. For so long, abortion had been criminalized and society as a whole had negative views on women having rights to end pregnancies, unwanted or not. Over the decades, there has been a lot of research on the topic, which can be very specific depending on what someone wants to know about this controversial topic. Some organizations like Planned Parenthood have become safe places for women who need access to get proper healthcare that includes HIV services, contraception, STD testing, pregnancy testing and services, men's health, and either abortion services or abortion referrals depending on the location.

A lot of this information about services accessible by women has posed a lot of discourse in the larger community of the United States, and many discussions have lead to what happens at the legislative level when it specifically comes to abortion. Giving access to (and properly educating) women on general healthcare, abortion, and options for women who have fetal complications during pregnancy is vital to their health and for society in order to support women and improve healthcare overall; however, more research is needed on the efficacy of abortions that take place in the third-trimester to provide a more informed choice and to eliminate stigma surrounding abortion.

In the recent months of 2019, two states have made huge pushes for giving more legal access for women in need of late-term abortions due to medical reasons. Normally, abortions are legal up to 24 weeks into the pregnancy and includes the second trimester. Anything past that has a lot more limitations as far as who decides if a woman can get an abortion and how many people are required to approve the procedure and is dependent on the state. Right now 43 states allow for abortions in the third trimester, but requires a conversation with the doctor and the client before any procedure happens (Guttmacher 2019). On January 22, 2019 the governor of New York signed a bill that allows for women who have complications in their pregnancies to get an abortion if the pregnancy poses a threat to the either the mother's health or the fetuses (NY State Senate 2019). Virginia Senators have also moved forward in January to introduce a bill that is similar to the New York bill in that it extends the legalization of when a woman can get an abortion in the later part of the pregnancy and lifts that restriction on the law (*House Bill No. 2491*, 2019). The proposed bill also changes wording and the number of doctors that are required to make the decision with the client to only one doctor.

Both situations have received very mixed responses on platforms such as news outlets and social media platforms that include Facebook and Twitter. From the pro-life, conservative side, a lot of people use religion that helps shape their rhetorical frame of not allowing abortion in the third trimester, and others with conservative views use words such as "infanticide" or "fetucide." More famous conservative instagramers such as Caleb Hull shared an edited video on the VA state Governor on his views on the proposed bill. The video seems to twist his words to make it seem that he was fully supporting "killing babies." (@CalebJHull 2019, Jan 30). However, this is not the only edited video that exists to fit the claim of one perspective even though that was not what was originally said in the first place.

When looking further into the "research" that the bills cite, and that other article cite, a very complex list of a lot of different foci as far as topics go. Through PubMed and other online databases that the University of Denver has access to, I saw topics such as Surgical Abortion vs. Medical Abortion, types of medicines and efficacy of termination, and some that hypothesized how medicines may affect women after the chosen procedure long-term. One issue that I think is important to note is that there is not a lot of easy-to-find research on the specific procedures that happen in the late trimester and how that may affect the mother. If there is, it is not easily accessible to the public for education on different options available to women.

With the bills being proposed or passed in recent months, many people seemed very outraged at the fact that women get abortions in the second and third trimester. These people immediately begin to tell women that this is "murder" and that it isn't right. According to the Center for Disease Control, 91.1% of all abortions take place within the first 13 weeks of gestation, and between 14-20 weeks about 7.6% of all abortions happen. The most surprising statistic was the fact that only 1.3% of all abortions happen past 21 weeks of gestation (Center for Disease Control, n.d.). The statistics above came from the year 2015.

As far as implications for this bill, it will only affect women who absolutely need it for health reasons that include the possible death of the mother or the baby, which already happens very rarely considering the chances of non-viability for a baby are quite small. Many people who are not educated on the subject matter think that any women in their third trimester can just go for an abortion just because she wants to claim that it might be "bad for her mental health." An article by Alex Pappas from Fox News titled, "Outrage as Video Shows Virginia Abortion Bill Sponsor Saying Plan Would Allow Termination up until Birth" is a really good example of misinformation about the proposed bill in Virginia in that the Republican House leader Todd

Gilbert asked that in the instance a woman requesting an abortion close to the birth for "mental health" reasons, that the bill would support that. After a bit of twisting of words and asking for an answer for a hypothetical case that would not be very likely, Senator Tran ended up responding without really thinking through the answer with "Yes."

Obviously they did not really read the bill because it isn't what it says, and the main goal of the bill was to limit restrictions on third trimester abortions. Also, about 43 other states have also passed laws on lifting those restrictions, although people seem to think that New York was the first state to do so (Guttmacher Institute, 2019). These restrictions may be lifted more as more states also pass more bills, but as far as implications, it is still somewhat difficult to tell, although it seems to expand healthcare for women as complications may arise in a pregnancy.

With today's discussions about abortion rights and bills passing or being proposed in order to lift certain restrictions on abortions that happen later in the pregnancy due to fetal anomalies and/or health risks for the mother because of pregnancy. Right now, 43 states have laws that allow these types of abortions to take place as long as their doctors can approve them due to these specific reasons. However, in more recent times with the United State's current administration, the effects of *Roe vs. Wade* are always debated when it comes to women's rights (that includes abortion rights). With the bill in NY, the update of when and why a woman can get an abortion later in the pregnancy created more accessibility for overall women's healthcare. The proposal also in Virginia could have better implications for the female population, and further helps those who may have complications such as fetal anomalies or health risks from the pregnancy itself. However, movements on the legislative level have seen a lot of backlash from extremist conservatives and the pro-life communities who make claims that are not as backed by facts or research. Then, the people who follow the discourse in these communities will most

likely begin to think a certain way and will not have properly informed decisions if they themselves have to get an abortion for different reasons. Miseducation that surrounds abortion seems to have broad implications in that stigma stemming from fallacies that people hold, and there needs to be more research done in the medical field that is accessible to the public so that stigmas can be removed and progress can be made for women's healthcare.

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