

## Abortion forward language

SAY THIS	INSTEAD OF	WHY
Abortion	Euphemisms like “women’s healthcare”, “reproductive choice”...	“Healthcare” encompasses a range of medical care. Using euphemisms for the word abortion gives opposition control over the narrative.
Ohioan(s), a person, they	Women, she/her	Gender inclusivity. People who don’t identify as women get abortions too.
A person’s (or) Ohioan’s decision to have an abortion	Person’s choice	A decision is definite, while choice frames that the person has options and plays into a conservative narrative.
Politicians shouldn’t deny a person’s health coverage just because she’s on Medicaid.	Your tax-payer dollars do not fund abortion.	When Medicaid covers the costs of all pregnancy care, including abortion, it means people can make the decision for themselves.
Every pregnancy is different. People seek later abortion care for different reasons: abortion restrictions made accessing care early on difficult, a wanted pregnancy is no longer viable, or a person decided they couldn’t be pregnant – they are all valid reasons.	Late term abortions are rare and people only make the heart-wrenching decision to have a late-term abortion when a pregnancy is no longer viable.	Framing later abortion care as something that only people with wanted pregnancies experience, disregards those who can’t access care early on in pregnancy because of the changing landscape of abortion restrictions, as well as those who simply no longer want to be pregnant. We should trust people and support their decisions.
Legal abortion must be available and affordable.	Abortion should be safe, legal and rare.	Making abortion rare restricts access and makes it dangerous.
Abortion is a safe and common medical procedure that everyone should have access to.	Nobody likes abortion.	1 in 4 Americans will have an abortion in their lifetime. We should normalize a common, safe medical procedure, and not make assumptions about how people feel about abortion.
We should ensure access to a full range of pregnancy-related care, from contraception to abortion to postpartum care.	If we want to reduce abortions, we should fund contraception.	We fall under the trap that access to birth control is somehow an alternative to abortion and perpetuates the stigma around abortion.
Specify that it is some policymakers or special interest groups who want to impose their values on others.	Demonizing the role of government.	We want the government to be involved in guaranteeing access to a full range of reproductive healthcare, including abortion care.
We need to trust young people – they deserve the right to consent to their own reproductive and sexual healthcare needs.	Kids are not mature enough, and therefore should have parental consent before getting birth control or an abortion.	Perpetuates the belief that young people lack the understanding or maturity to make important decisions for themselves.

*From [trustrespectaccess.org](http://trustrespectaccess.org)*