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Abortion: Easy Access, Complex Everything Else

By ARIEL KAMINER JAN. 21, 2011

Congratulations, New York City, did you hear the news? Fire-and-brimstone predictions from across the country have been confirmed. This is officially the abortion capital of America. A health department **report** released last month proves it: about 40 percent of all pregnancies in the city end that way, an average of about 90,000 a year in recent years.

No one is exactly celebrating the title. Archbishop Timothy M. Dolan and a group of multidenominationally horrified clergy condemned the statistics this month. Even abortion rights advocates expressed some concern about the numbers, trying to change the conversation to a broader one on reproductive health. As for ordinary citizens, many just wondered: Really? That many?

Abortion is complicated, even in its capital city. Perhaps especially so: New Yorkers seeking to terminate a pregnancy can choose from more kinds of procedures at more kinds of facilities with fewer obstacles — and more ways to pay — than just about any place else. Women can get abortions in private doctors' offices, at public hospitals or at clinics, some of which do not require an appointment.

"They say, 'I need help,' " said a doctor who works at one community health clinic. " 'What should I do? Where can you send me?' And I say, I don't need to send you anywhere. We can do that here." Specifically, doctors can administer the combination of pills that, when taken before the ninth week of pregnancy, produce what is known as a medical (rather than a surgical) abortion. Things can move very quickly. Within an hour of her arrival at that doctor's office, a patient obtaining that procedure might sign a consent form, make arrangements for the \$375 fee — covered by most insurance — and take the first dose of medication. She would leave the office with four more pills to be taken later, a prescription for pain medication and the doctor's personal cellphone number, in case of questions. "I'm old enough to remember pre-Roe-v-Wade days," the doctor said. "A little bit of inconvenience for me is nothing compared to what people used to go through."

The name of the doctor so committed to her patients? She spoke on the condition it not be mentioned. Nor that of the community health center where she works. Though the clinic advertises its services, it is wary of unwelcome publicity. Abortion is complicated, even in its capital city.

New York has always been at the forefront of reproductive choice, from a 19thcentury industry of sometimes dubious tinctures to an underground abortion network organized by local clergy in 1967. It was the home base of Margaret Sanger, the mother of American family planning. Abortion was permitted in New York State long before the 1973 Supreme Court decision — whose anniversary was Saturday made it legal nationwide.

Unlike many other places, New York has not passed laws limiting access to abortions. Patients do not have to return to the clinic on two separate days. They do not have to be told about what the fetus will experience, or have to look at the fetus on a monitor or have the procedure narrated to them in real time. Teenagers do not need parental consent.

In many other parts of the country, doctors who want to perform surgical abortions have to go out of their way to learn how. In New York, such training is a standard part of the curriculum for obstetric and gynecological residents. So instead of quarantining abortion into special clinics, many doctors offer it as part of a menu of services.

In New York, unlike in most states, Medicaid covers abortion. (In 2009, counselors at Planned Parenthood's four clinics across the city helped more than 6,800 patients who were eligible to sign up for that program.)

Finally, New York's public hospitals are unusual for being under the control of the mayor. Just try to get elected mayor of New York without demonstrating clear support for abortion rights.

All of these circumstances have combined to make New York something of a magnet — for doctors who wish to practice without restrictions, for women who want to live in an atmosphere of sexual self-determination and even for out-of-towners who want to end a pregnancy without stigma, without hassle or just without bumping into their neighbor on the way into the clinic. In 2009, 8 percent of the abortions performed across the city were for patients who live elsewhere. In addition to everything else, our abortion industry may function as something of a tourist attraction.

The vast majority of abortions in New York — 88 percent — take place in the first 12 weeks. All but 2 percent take place in the first 20. After that, women's options narrow. It's far too late for pills, and too late for most OB-GYNS. So, many women are referred to specialists like Dr. Robert Berg, who occupy the outer edge of New York's abortion landscape, terminating pregnancies up to the legal limit of 24 weeks after conception. The procedure costs about \$15,000, some of which is typically covered by insurance, and starts in his office, where he dilates the patient's cervix to approximate the effects of labor. He describes the process as "quite unpleasant." A day or two later, in an operating room at NYU Langone Medical Center, Dr. Berg removes the fetus, either intact, using his hands, or "destructively," using medical instruments.

Dr. Berg tries to avoid getting emotional about his work. But his patients are in a different position. "An 18-year-old girl who forgets her birth control and comes to you at six or seven weeks of pregnancy is not such an emotional thing," he said. "The 41-year-old who's been trying for seven years to get pregnant, then at 21 weeks she finds out she has breast cancer and has to terminate the pregnancy, that's a much bigger deal."

As a result, Dr. Berg said, some patients seeking late-term abortions are "hostile to me, they're hostile to my office staff."

"I'm just a punching bag," he added. "I don't do well with that. Sometimes they won't even look at me the day of the procedure; they won't speak to me. That I despise. I really hate that.

"They were referred to me because I do it safely and expeditiously," the doctor continued. "To be treated like garbage — and my staff — is really very upsetting."

Abortion is complicated, even in New York.

E-mail: citycritic@nytimes.com

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