

# Reproductive Healthcare Access for Survivors of Sexual Violence

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Wisconsin Coalition Against  
Sexual Assault

*Revised November 2025*





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# Introduction

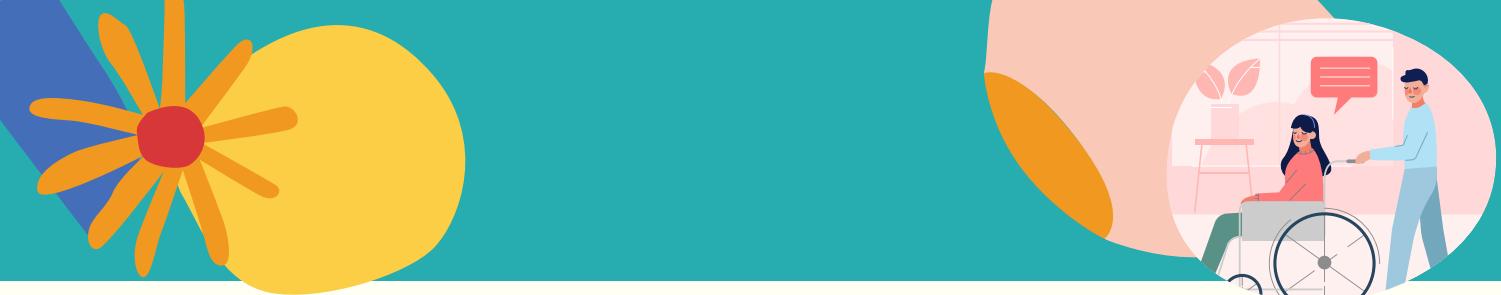
Reproductive health and reproductive justice are essential for survivors, as well as an integral part of sexual violence prevention. Survivors need and deserve autonomy and decision-making power over their bodies, especially after experiencing the trauma of sexual violence. Examples of reproductive health decisions could include any immediate and lifelong health concerns after a sexual assault, such as sexually transmitted infection testing, access to emergency contraception, or an abortion to address pregnancy concerns.

According to the [World Health Organization](#), reproductive health is defined as a state of complete physical, mental, and social well-being and not merely the absence of disease, in all matters relating to the reproductive system and to its functions and processes. It implies that people are able to have a satisfying and safe sex life, and that they have the capability to reproduce and the freedom to decide if, when, and how often to do so.

**What is  
reproductive  
health and  
reproductive  
justice?**

[SisterSong](#), defines reproductive justice as the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities. When we think about reproductive justice, SisterSong reminds us that Roe v. Wade always was the bare minimum; there many other aspects we need to think about.

All people impacted by sexual violence should have access to the resources and services available to support their healing, as well as support in their decisions post-assault. Access to emergency contraception and abortion are an important part of those services. While Roe vs Wade granted a constitutional right to abortion health care, it never guaranteed access. For example, before June 2022, there were only 3 clinics in the entire state that performed the procedure. This meant there were still incredible barriers in place to receiving that care.



Access has been a problem even under Roe vs Wade; therefore, advocates play an important role in helping survivors access reproductive health care. For example, advocates can identify the family planning clinics in your area and find out what services they provide. Introduce yourself and your agency and collaborate on service delivery to ensure comprehensive care. Make sure there are brochures or other handouts available in your agency for easy referrals; ask if those clinics will allow you to keep some of your agency's outreach materials there. Advocates are in a pivotal position to assist survivors with access to the reproductive health care services survivors need/want after an assault.

## Access to Emergency Contraception

Emergency contraception refers to safe and effective methods of birth control used to prevent pregnancy. There are a few to choose from (see chart below), with the most common being emergency contraception pills. You may see them referred to as "morning-after pills"; however, they can be taken up to 72-hours (some within 5 days) after the assault, though it works best the sooner it is taken. Emergency contraception will not cause an abortion; it will not disrupt an existing pregnancy.

There is evidence to suggest that the more a person weighs, the closer the person is to ovulation, and whether the person takes certain medications or herbal remedies, the less effective emergency contraception pills will be. It does not mean the pills will not work; however, this is something to consider. If the person vomits within 2 hours of taking the dose, please have them talk to a pharmacist.

	Brand name	Weight limit	BMI limit	When to take it
EC pill with ulipristal acetate	ella	up to 195 lbs.	none	within 5 days
EC pills with levonorgestrel (a progestin)	Plan B, Next choice	up to 155 lbs.	up to 30	within 72 hours
combination birth control pills	Aviane, Enpresse, Levora, Nordette, Seasonale, and more	none	none	within 72 hours
copper IUD	Paragard	none	none	within 5 days

Weight Limit for Plan B, Other Emergency Contraception: Chart, Studies (healthline.com)



Emergency contraception pills with levonorgestrel, for example Plan B, are available over-the-counter (OTC) without a prescription at drug stores or your local family planning clinic. It is permissible for sexual assault service programs, or SASPs, to purchase emergency contraception with grant funds, specifically the funds used to provide emergency support for medications. WCASA recommends SASPs and other organizations working with survivors purchase OTC emergency contraception and offer it without barriers; meaning the emergency contraception should be in a location where survivors have easy access. The medication does have an expiry date, so consider only purchasing in quantities you can reasonably see your agency using.



**"Abortion is normal, safe, essential health care. Receiving or providing this care should not be criminalized. ... Abortion care is health care, and it is essential care we must protect. The patients I care for, my community, my friends and family deserve dignity. They deserve autonomy and agency."** — Dr. Yashica Robinson



Some programs have elected to have emergency contraception in the lobby or other common area, with access to other reproductive health information and supplies (condoms, lube, pregnancy tests, pads, tampons, etc.). Some shelter-based programs keep emergency contraception in a bathroom or pantry area with other OTC meds (ibuprofen, acetaminophen, antacids, etc.). If you are unable to offer this type of open access, it is important to have signage detailing available supplies, so survivors know you have them on-site. The goal is to provide free, safe, and shame/stigma-free access to these essential reproductive health supplies.

For more information on possible side effects and questions about the efficacy dependent upon weight or other factors of emergency contraception, please connect with your local family planning clinic. To locate your nearest clinic, please access the links on page 12 of this document.



## Compassionate Care for Rape Victims

If the survivor you are working with wants to get emergency contraception from the hospital, it is important to understand [Wisconsin's Compassionate Care for Rape Victims Law](#). Enacted in 2008, the law ensures hospitals provide medically and factually accurate oral and written information to female survivors who become pregnant on the use and effectiveness of emergency contraception and provide all doses on site, regardless of any religious affiliation. Any hospital who violates the law may be required to pay a fine. Any [questions about compliance](#) can be made to the Bureau of Health Services at 608-264-9887 or 414-227-4556.

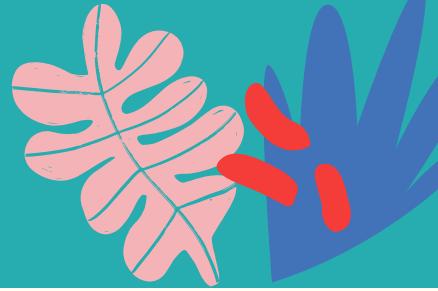
  
"No law, no piece of paper that is hundreds of years old, will ever have me believe what is right or wrong about what choices I make with my body.

My body, my choice." —Thalia, 20

## Access to Abortion Services

Abortion is an important healthcare decision made between an individual and their medical provider. Abortion is not only an important issue for survivors (they deserve access to all available options after an assault), but also central to sexual violence prevention, where concepts of body autonomy and decision making are foundational. All survivors should have access to abortion services; however, that is not always the case.

[Monica Simpson](#), executive director of SisterSong, reminds us that choice does not exist without access; *"People seeking abortions in America must consider: Do I have the money? How far is the nearest clinic, and can I get there? Can I take off work? Will I be safe walking into the clinic? For more privileged people, these questions are rarely a deterrent. But for many women of color and poor people, they are major obstacles. That's how white supremacy works."* We should be thinking beyond the choice to have an abortion, and instead focus on access to abortion services.



Equally of concern is what happens when abortion is not only banned but criminalized. The racial disparities in the criminal legal system are well documented, and the criminalization of abortion will no doubt disproportionately harm Black, Indigenous, and People of Color.

When working with survivors who want abortion-related healthcare, advocates should be prepared to discuss any potential and available pregnancy options with survivors, including abortion. Bodily autonomy and decision-making ability are critical for survivors; it applies to options about abortion and other reproductive health needs following an assault. Having an abortion is a personal medical decision, and an advocate's own feelings should not impact or interfere with the survivor's decision or the care they receive. It is the advocates' role to support the choices a survivor makes, while working to ensure access to available services. Advocates should know where the nearest abortion provider and family planning clinics are, as well as the resources available to financially assist anyone who needs that support. Information on those financial resources is on page 9 of this document.

**"Reproductive justice is often solely framed around birth control and abortion access, but it's also deeply tied to ending police violence and the damage it causes Black families." – *SisterSong***

Accessing abortion healthcare services in Wisconsin is especially difficult; not only in the scarcity of locations, but in the legal barriers to accessing care (which are listed on the next page). In the entire state, there are only 5 locations where abortions are performed. Planned Parenthood offers abortion healthcare services in three of their clinics: Madison, Milwaukee, and Sheboygan (medication abortion only). There are two independent clinics in Milwaukee that also provide abortions: Affiliated Medical Services and Care for All.

While it is legal to get an abortion in WI, it does not come without restrictions; access is still an issue. There are several hurdles a person must go through to get the procedure.



According to Guttmacher, the following abortion policies are currently in effect in WI (as of September 10, 2024):

- Abortion is banned at 20 weeks or later
- Counseling is required before the procedure: one in-person session and another at least 24 hours later
- An ultrasound is required, even if it is medically unnecessary
- Medicaid coverage for the procedure is banned, except in very limited circumstances
- Medication abortion must be given in-person, telehealth is not an option
- Parental consent is required for minors who wish to get an abortion
- Only physicians can perform the procedure
- WI does provide protections from harassment and physical harm for anyone entering a clinic

**“Reproductive freedom is critical to a whole range of issues. If we can’t take charge of this most personal aspect of our lives, we can’t take care of anything. It should not be seen as a privilege or as a benefit, but a fundamental human right.” — Faye Wattleton**

Self-managed abortion, or medication abortion, is an additional option for survivors. The Federal Drug Administration has declared medication abortion safe and effective; however, a prescription is still needed to purchase the pills. For more information, please connect with your local family planning clinic, or visit Plan C or Aid Access.

While taking medication abortion pills is safe, there are possible side effects: cramping, heavy bleeding, nausea and vomiting, diarrhea, dizziness, tiredness, mild fever. The survivor will want to follow-up with a pregnancy test, ultrasound, or blood test a few weeks later to ensure the medication worked. If there are any concerns about the side effects or medical care is needed after taking the pills, please connect with your local family planning clinic or medical provider.



## Practical Support for Abortion Services

Practical Support Organizations offer several different support services to people seeking an abortion. For example, funds to pay for the full or partial cost of the abortion, travel expenses, childcare expenses, lodging assistance, and/or food costs. In order to answer basic questions about the available supports, it will be helpful for advocates to have a general understanding of what resources are available and where/how to access them. Listed below are resources in WI, and the greater Midwest area. Some funds are tied to a specific geographic area or are culturally specific to a historically marginalized community. When in doubt, it is best to connect with your local family planning clinic with any questions around practical supports and how they can be used.

**"This is what abortion looks like. A 21-year-old trans man who was given a choice between living or dying. And it was rather obvious what the preferred choice there was. I'm still breathing because I was lucky enough to be able to access such an option."**

*- Kris, Florida*

<u><a href="#">National Network for Abortion Funds</a></u>	<u><a href="#">Midwest Access Coalition</a></u>
<u><a href="#">Wisconsin Abortion Fund</a></u>	<u><a href="#">Indigenous Women's Rising</a></u> (for Indigenous people specifically)
<u><a href="#">The Brigid Alliance</a></u>	<u><a href="#">Options Fund</a></u> (northwest WI specifically)
<u><a href="#">Chicago Abortion Fund</a></u>	<u><a href="#">Freedom Fund</a></u> (northern WI specifically)
<u><a href="#">Women's Reproductive Rights Assistance Project</a></u>	<u><a href="#">National Abortion Federation Hotline</a></u>
<u><a href="#">Planned Parenthood Justice Fund</a></u>	<u><a href="#">Heart</a></u> (for Muslims)



In addition to advocates helping survivors access outside funds, agencies can explore identifying their own funding sources to assist in covering the costs for survivors. Consider hosting a specific fundraising drive through social media or mailing campaigns letting donors know the funds will be used to help survivors access the reproductive healthcare and abortion services they need. Ultimately, we want to make sure survivors are not forced to cover the costs on their own.

**"Young people everywhere have the right to the knowledge, tools and services they need to make informed decisions about their bodies and live full, healthy and productive lives."**

*– Jill Sheffield, Founder and President of Women Deliver*

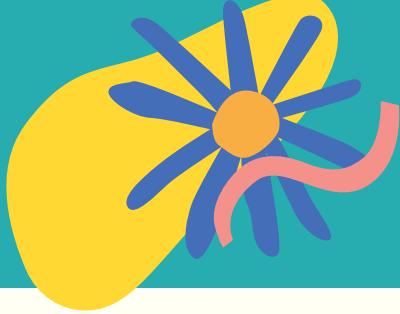
## Accessing Reproductive Healthcare as Minors

Accessing abortion services in Wisconsin as a minor is just as complex as accessing care as an adult. While it is typically important to include parents and guardians in healthcare decisions, for a myriad of reasons, it is not always possible for a lot of young people. This means it is crucial for minors to know and understand their reproductive rights.

In Wisconsin (as of August 30, 2023), generally people under the age of 18 can:

- access emergency contraception from a health care provider or buy Plan B over the counter
- get a pregnancy test confidentially from a health care provider or buy one over the counter
- get confidential testing and treatment for STI's from a healthcare provider
- purchase Opill, a progestin only over-the-counter birth control approved for people of all ages

A minor cannot obtain an abortion without parental consent. If consent cannot be given, a judicial bypass is necessary, which allows a minor to waive the requirement for parental involvement. For more information on judicial bypass, contact the If/When/How Judicial Bypass Helpline: call 844-868-2812 or submit an information request online.



One aspect adding to the complexity of minors accessing healthcare is mandated reporting. The State of Wisconsin has carved out an exception to reporting requirements to allow children to obtain confidential health care services, with some exceptions. Health care services means family planning services as defined by law, pregnancy testing, obstetrical health care or screening, and diagnosis or treatment for a sexually transmitted infection. Health care providers for purposes of this exception include physicians, physician assistants, and registered or licensed nurses. For more information, please see [this information sheet](#) on mandated reporting for child abuse and neglect.

**"We've allowed shame to be associated with a safe health procedure and it's misogynistic and it's racist. We have to dispel the myths and the stigma."**

**— Rep. Jackie Speier**

## Crisis Pregnancy Centers

Crisis pregnancy centers (CPCs) are organizations that pose as clinics, but whose aim is to convince people not to terminate their pregnancy. CPCs target people who are pregnant by offering free pregnancy tests, ultrasounds, and pregnancy counseling. Most have a religious affiliation, do not provide comprehensive healthcare services, and often mislead people about sexual health and pregnancy options. Because they are not actual clinics, they are [not required to comply with HIPAA](#) to keep any medical information private.

There are websites available that help people identify whether a clinic is real or is a CPC. With a zip code or state search, [Crisis Pregnancy Center Map](#) will list known centers in the given search area. It is important for advocates be aware of any CPCs in their service area and talk to the survivors about the harm they may cause. Listed on the following page are some ways to identify if the clinic is a CPC or an actual family planning clinic. Linked [here](#) is a printable PDF on how to spot a crisis pregnancy center.



Here are some signs that can help identify if the organization is a CPC:



- They advertise free pregnancy tests, abortion counseling, abortion education, or offer care for after an abortion – but they will not assist anyone to get an abortion
- They offer an 'abortion pill reversal' or say that an abortion can be reversed
- They lie and say an abortion is unsafe, can lead to cancer, infertility, or mental health problems
- They pressure people to continue the pregnancy or put the baby up for adoption
- While they may offer essential supplies such as diapers, formula, or clothes for the baby, they often make people earn the supplies by going through lectures or workshops
- They often have their offices near genuine family planning clinics to confuse people

## Importance of Collaborations

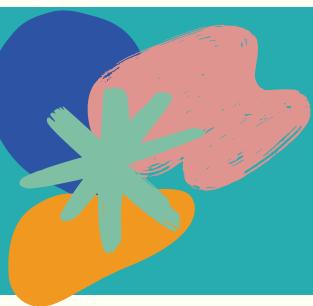
Connecting and forming relationships with the local family planning clinics in your area is a great way to ensure comprehensive services are available to the survivors you work with. Be proactive in locating partners in your area and engage in conversations on emergency contraception access and abortion services/referrals. Know what services each clinic offers, and what services aren't available; for example, if one clinic doesn't offer intrauterine device (IUD) insertion services, identify one that does.

### Websites to Identify Local Public Health and Family Planning Clinics



- Locate your local Planned Parenthood Health Center
- Locate a Title X funded clinic
- Locate a community-based family planning clinic
- Locate your local public health office





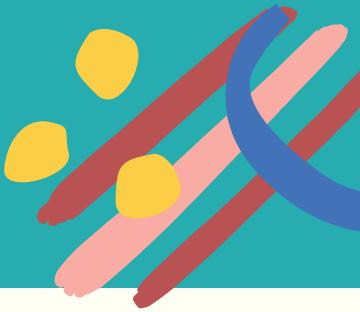
Collaborating with your local public health or family planning clinic will ensure survivors have multiple options for their reproductive health. This is especially true if the person does not want a forensic exam or doesn't have health insurance. Many family planning clinics have a sliding scale, income-based payment system, or waivers for those who do not have insurance. Survivors can access a variety of essential services to address their reproductive health needs, including STI and HIV testing, pregnancy tests, reproductive health screenings and any referrals that may be needed, and emergency contraception services and supplies.

**"The emphasis must be not on the right to abortion but on the right to privacy and reproductive control."**

*— Ruth Bader Ginsburg*

## In conclusion

Accessing reproductive healthcare in this current landscape can be difficult, and often times scary. WCASA is committed to ensuring that advocates have the information and tools necessary so the survivors they work with have minimal barriers when accessing necessary healthcare. Advocates are encouraged to connect with WCASA staff with any questions or concerns they may have by emailing [wcasa@wcasa.org](mailto:wcasa@wcasa.org) or calling 608-257-1516.



# Resources

## Abortion Information

- [Planned Parenthood of Wisconsin](#)
  - 800-230-PLAN (7526)
  - [Abortion Resources in Wisconsin](#)
  - Abortion Navigators
    - [abnav@ppwi.org](mailto:abnav@ppwi.org) or 414-289-3002
- [INeedAnA.com](#)
  - 202-883-4620 – textline
- [AbortionFinder.com](#)

## Medication/Self-Managed Abortion

- [Plan C](#)
- [AidAccess](#)
- [How to Use Abortion Pills Fact Sheet](#)

## Emergency Contraception

- [Three For Freedom](#)
- [What should I use? – Planned Parenthood](#)
- [Office on Women's Health Q&A](#)
- Amazon.com
  - [PlanB One-Step](#)
  - [MyWay – generic](#)

## Legal Assistance

- [Pregnancy Justice](#)
- [Lotus Legal Clinic](#)



## Practical Support Organizations

- [National Network of Abortion Funds](#)
- [Find your local Practical Support Organization](#)

## Helplines

- [Judicial Bypass – for minors](#)
- [If/When/How](#)
- [All Options](#)
- [Wisconsin Abortion Fund](#)
  - 888-534-4652

## Adoption Resources

- [National Pro-Choice Adoption Collaborative](#)
- [About Adoption – Planned Parenthood](#)

## Miscellaneous Resources

- [Create an abortion safety plan](#)
- [Digital Security for abortion information](#)
- [Crisis Pregnancy Centers in Wisconsin and Beyond](#)
- [Crisis Pregnancy Center Map & Finder](#)
- [Understanding Abortion – a pocket guide](#)



# **Wisconsin Coalition Against Sexual Assault**

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