Trump ran on an extremely conservative platform in regards to reproductive rights. The potential changes are troubling, and repealing the Affordable Care Act would affect many American’s gravely. Please make the time to access care and consider long-term forms of birth control in the next few months while it is still available to you.

**HOW YOUR RIGHTS MAY CHANGE:**
- Trump has spoken about overruling Roe v. Wade. His appointment of one anti-choice justice will not be enough to enact this. We cannot know for sure, but it will be held up highly for him to follow through on this statement.
- Title X, which is a program that subsidizes family planning health care for low-income women and men could be defunded, along with programs like it.
- There will be attempts to sign into law the Pain-Inducing Unborn Child Protection Act, which would ban abortion after 20 weeks—before many types of fetal anomalies can be detected.
- There are plans to defund Planned Parenthood as long as they continue to perform abortions, which accounts for just ~5% of the services they provide.
- There is a push to enact the Hyde Amendment—a rider which bars federal funds, including Medicaid, from being used to pay for abortions into permanent law. This legislation disproportionately impacts low-income women and women of color who rely on Medicaid for insurance.
- There is an opposition to the use of emergency contraception, including the morning after pill and the copper IUD which could make these harder to access in the coming years. On that note...

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**WE SUGGEST YOU GET AN IUD:**
For those fearing dwindling access to birth control, the IUD’s long-term effectiveness has made it the BC of choice for many concerned cis-women, trans-folx, and GNC people. As we gear up to march, rally, and organize, make sure to take a few moments for yourself and learn about your BC options. Choosing an IUD should never be rushed, we hope that you explore your options, ask around and make sure your choice is perfect for you.

**WHAT IS AN IUD?**
IUD stands for intrauterine device, which is a device inside your uterus. It is one of the most effective birth controls out there—more than 99% effective. (That means fewer than 1 out of 1,000 women who use an IUD will get pregnant each year.) They are a small, “T-shaped” device that is inserted into the uterus in order to prevent pregnancy. It is long-lasting, reversible, effective, and safe. It must be inserted by a health care provider.

**HOW TO GET AN IUD? WHAT TO EXPECT?**
With the Affordable Care Act, most insurance plans are pushed to cover all types of FDA-approved birth control with no out-of-pocket costs, but it is very important that you call your insurance company to be sure. It is important to ask if they will only cover the IUD but the visit for the actual insertion and potential pregnancy tests or other screenings they may require. If you don’t have health insurance, different clinics offer options for free or reduced cost services. Insertion takes about ten minutes, and there’s no hard and fast answer on what it will feel like: some women feel a small pinch, whereas others feel more pain. Wear loose clothing and know that you might bleed, and don’t forget out if your body does some weird stuff for a few months after—it is all part of the process.

**CHOOSING YOUR IUD:**
Ask your doctor and friends who have IUDs what to expect—the experience is different for everyone. Please reference our IUD chart for more info on choosing between hormonal and non-hormonal.

* There are more types of IUDs than just the chart below. However, the two shown last longer than Trump’s time in office.

**IUD Option**
- Para-guard
- 10
- NA (only non-hormonal IUD options)

<table>
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<tr>
<th>Meena</th>
<th>20 mg/day of levonorgestrel</th>
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| Decrease menstrual bleeding and pain change it will take away your period. Since the hormones are released locally in the uterus and not the blood streams, the side effects from the hormones are minor, but you can expect similar side effects such as breast tenderness, mood changes or acne.

**REPRO-RIGHTS FOR TRANS & GNC**
Depending on what stage of your transition you are in and how you have sex, you may need to use birth control and should speak to your doctor about what option best suits you. Standard preventive health screenings are generally recommended for the body parts a patient has regardless of that patient’s gender identity, including breast, cervical, and prostate cancer screenings. Continued regular STD, STI and HIV checks are recommended to folx at any point on the gender spectrum.

Although many health providers are not up to date in how they serve Trans & GNC patients, and many report a lack of respect and understanding in how gender is addressed; it is important to protect your health despite the inherent dishears many experience. Interactions with health institutions should not be feared. The LGBTQ+ center for advice in finding service providers that best suit your needs.

**MTF:**
If you are interested in having biological children you should look into freezing and storing your sperm as hormonal therapy and other procedures of your transition will likely make you sterile. The procedure of freezing your sperm is a costly one with annual bills to continue storage. It is your personal choice to decide how you prioritize the steps of your transition within your budget.

**FTM:**
Like with MTF transitioning, if you are interested in having biological children you should look into freezing and storing your eggs as other procedures of your transition will likely make you sterile. Egg freezing and storage is even more expensive than sperm storage. It is your personal choice to decide how you prioritize the steps of your transition within your budget.