**Abortion in Chile**

**Anne Hoffman**

About a year ago, a young woman named Valeria went to a motel looking to rent a room in Santiago, Chile. She lived in the city and would only need the room a few hours. Valeria hadn’t dated anyone in five months, but she brought her old boyfriend with her. After she spoke with the desk clerk who gave her the keys, Valeria found her room and laid out several pills of a drug called misoprostol. They were small white hexagons. And they would, over the course of a few hours, end her pregnancy.

Valeria had been to the doctor a few days earlier looking for solutions. She had told her she didn’t want to have the baby. “A little baby, what am I going to do with a baby?” she had asked herself. Valeria was 25 years old, and while she wanted to have a baby at some point, this was not the time. She had just finished her social work degree and needed to find a job.

The doctor told Valeria she should start taking prenatal vitamins. She made her listen to the fetal heartbeat. She seemed to be in a deep fog of denial, of willful ignorance.

Valeria was frustrated. “Out of love for myself, for the other *loco* in the situation,” she knew she couldn’t carry the pregnancy to term.

But she had little idea of where to seek out an abortion or what one would look like. Many of the stories you hear about abortion in Chile involve women who meet horrible ends, said Valeria. “I imagined some little girl dead in a field. The stuff they show on TV is always so harsh and judgmental.”

Most kids in Chile don’t receive sex education at school, so myths abound. Parents and family members often shy away from sex talks. Up until a few generations ago, some mothers didn’t explain menstruation to their daughters. “I thought I was dying when I first got my period,” said a woman named Carmen Ocampo, who grew up in Concepción 30 years ago.

According to a sociologist named Catalina Flores, to this day, teenagers in Chile believe any number of erroneous but oft-repeated ideas about sex and pregnancy: such as, if a girl urinates after sex, she cannot get pregnant. There’s still very little public discourse about safe sex, personal boundaries, and prevention. Chile is a secular state, but the Catholic Church and particularly the conservative group Opus Dei have undeniable influence over policy and schools.

Valeria’s desire to end her pregnancy did involve certifiable risks. In Chile, medical doctors have little experience performing abortions. They learn one method, called curettage, in case a woman miscarries and the fetal remains needs to be removed. Curettage involves scraping out the lining of the uterus, and is far less sophisticated and far more risky than what doctors practice in the United States and most of the developed world — a procedure called aspiration — in which the fetal remains are vacuumed out.

When women get pregnant in Chile and decide they don’t want to carry their pregnancy to term, they are left with few options.

Option one: Fly to Miami or Havana. Check in to a clinic. Recuperate on the beach for a few days afterward.

Of course, a plane ticket to Miami or Havana plus medical expenses is not an option available to most Chilean women, where the rate of income inequality is one of the highest in the world.

Option two: Seek out a secret clinic where a well-trained doctor will end things underneath the noses of conservative policymakers.

But secret clinics have a lot of overhead, and so an abortion there is expensive. In the 90s, the cost was between $800 and $1000.

Option three: La *partera*. A midwife who could ask you to douche with parsley.

The downside? It’s likely nothing will actually happen, and you’ll still be pregnant. At worst, there is the possibility of infection and medical complications.

But abortion access opened up with the introduction of a drug called misoprostol, which was traditionally prescribed to treat stomach ulcers. If taken in large enough quantities, say 10 or 12 pills instead of two or three, misoprostol will induce an abortion during the early stages of a pregnancy.

When women and their gynecologists began to figure out that misoprostol could end pregnancies in the privacy and comfort of one’s own home, the drug became very popular. One gynecologist told me she used to write prescriptions for teenage girls.

Now it’s not so easy to get misoprostol in Chile. Once the government was hip to its alternative use, they banned it. The drug was still accessible, still used in hospitals, but pharmacies were dry.

And so began a black-market of underground misoprostol sales. There are dozens of websites where you can order the drug, but more often than not, what you get in the mail or from some guy in a dark coat is not, in fact, misoprostol. It’s aspirin, or perhaps a sugar pill. For the discerning customer, crooks are easy to spot. Often the drugs they hand off come in the wrong shape. Or they sell two or three as opposed to the necessary 10 or 12.

But Valeria, who had not let her first doctor’s visit discourage her, was luckily in possession of the proper dosage of pills. They were the real thing; she could tell by the trademark hexagon shape.

Following a friend’s advice, she had called a hotline called Lesbians and Feminists for the Right to Information. The group is composed of a wide swath of Santiago’s queer community: soft-spoken femmes, big-boned butches, and American straight girls who consider themselves politically lesbian. The group sees Chile as a “profoundly sexist country” that restricts abortion to keep close tabs on female sexuality and access to pleasure.

The hotline is actually a cell phone that group members pass off to each other during different shifts. Each member follows a strict protocol. The person on the other end of Valeria’s call had to record their conversation for legal purposes. They could only speak to Valeria in the third person, saying things like, “A pregnant woman can take 12 misoprostol pills to induce an abortion.” Addressing Valeria as “you” would have been crossing a clear legal line, and would have put the hotline, which had already been investigated by Chilean police three times, at risk.

Valeria also met a sympathetic doctor who directed her to a Dutch NGO called Women On Waves, or *Mujeres Sobre Las Olas*. The group operates on a sliding scale. At first, Valeria couldn’t afford the pills, but they lowered the price.

After she took her pills, Valeria experienced painful cramping, similar to a rough period. Misoprostol causes contractions in a pregnant woman’s womb, and those contractions evacuate the fetus. Valeria rested and took comfort from the man who’d gotten her pregnant.

“It was easy, *tranquilo*,” she says about that day in the hotel room. “It was painful, but not so painful either.”

When it was all over, Valeria would check out of the motel and go home. In time, she’d become friends with the group of women who ran the feminist hotline. Many of these women had themselves been to secret clinics or aborted with *parteras*. They’d invite Valeria over to their communal house in a bohemian neighborhood of Santiago, where she would drink special coffee made from corn.

When her parents asked her how she had met these new friends, she would omit parts of the truth. No one in her family knows about that day in the motel with her ex-boyfriend, the small white hexagons. That memory belongs to Valeria. “It was my decision,” she says resolutely. “It had to do with the love I have for myself.”

Despite growing up in a country that is both culturally conservative and Catholic, Valeria’s views have always been pro-choice. “Growing up I had this idea that people would die from having an abortion. That they would go to such extremes. It made more sense to me that society should regulate the situation. I always believed that. And I still do.”