

Recent Legal Shifts and Regression

On June 24th, 2022, the Supreme Court overturned the pre-existing Roe v. Wade ruling of 1973, declaring abortion no longer federally protected for any woman, in any circumstance, under our constitution. This is a drastic removal that puts women at risk, eliminating basic guarantees of the right to physical and psychological safety, or the right to their own life once pregnant. Women are now at the mercy of their state government's decisions, and there is no national protection or oversight deeming abortion a right of any citizen.

As a result of Dobbs v. Jackson Women's Health Organization, 66 clinics across 15 states stopped providing abortion care. "Restricting access to abortion has consistently been shown to cause serious harm, including increased maternal mortality (overall and for vulnerable subgroups)⁴; intimate partner violence and homicide⁵; increased anxiety, chronic pain, pre-eclampsia, and postpartum hemorrhage; higher odds of poverty and unemployment⁶; and increased rates of children entering foster care." Texas implemented a rigid abortion law following the new Supreme Court ruling, which has increased infant mortality in the state by just under 13% and has increased self-managed and unsafe abortions by 40%. Infant deaths due to congenital anomalies (the leading cause of mortality for infants) have increased by 22.9% in Texas, as compared to a small decrease in the rest of the country. The impact of total abortion bans is an estimated 24% rise in annual maternal deaths, and a 39% rise in maternal deaths for non-Hispanic Black women.¹ "Policies restricting access to abortion bring with them significant threats and harms to health by delaying or denying essential evidence-based medical care and increasing the risks for adverse maternal and infant outcomes, including death."² Under rigid

¹ Norris, L. (2023). *US abortion restrictions are causing widespread harm*. ProQuest.
<https://www.proquest.com/docview/3100726996?accountid=351&sourcetype=Scholarly%20Journals>

² White, K., Kumar, B., & Goyal, V. (2023). Abortion policy in the United States: The new legal landscape and its threats to health and socioeconomic well-being. *American Journal of Public Health*, 113(5), 461–464.
<https://doi.org/10.2105/AJPH.2023.307325>

statewide bans where insurance does not cover abortion, or abortion is not covered at all, women must pay out-of-pocket, travel, and take time off work to access it, and this is not possible for everyone. Some states are even considering criminalizing travel and out-of-state care to further prevent access, and healthcare providers may face legal repercussions for allowing abortion, even if a situation is life-threatening.³ The risks of abortion bans extend further because they push essential healthcare providers away. “Within 15 months of Idaho’s abortion ban, the state lost 22% of its practising obstetricians and gynaecologists, accelerating the state’s alarming maternal mortality crisis.” Seventy-six percent (76%) of medical providers and trainees of over 2,000 surveyed reported they would not work in states where providing abortions leads to legal consequences. States that ban abortions also invest inadequately in support for families after the child is born, such as parental leave and financial assistance. “...Idaho and Texas refuse to expand Medicaid, a safety net programme linked to reduced maternal mortality. In Texas, burdensome tactics like checking the eligibility of children on Medicaid every four months have led to increased rates of uninsured children in the state.²⁰ Half of all states with abortion bans are ranked in the bottom 10% for child poverty.²¹”⁴ Restrictive abortion bans will directly increase the number of families facing critical financial hardship, the number of children born into and living in poverty, and racial inequity in socioeconomic security. Welfare systems created to aid these serious issues are under-resourced in the highest-risk states, and so,

³ The Lancet. (2022). Health organizations fear effects of US abortion ruling. *The Lancet*, 399(10345), 1682. <https://www.sciencedirect.com/science/article/pii/S0140673622008716>

⁴ Norris, L. (2023). *US abortion restrictions are causing widespread harm*. ProQuest. <https://www.proquest.com/docview/3100726996?accountid=351&sourcetype=Scholarly%20Journals>

simultaneously, mothers, children, and families will be under-supported on basic levels by the governments that exercise the most control.⁵

Ten states have banned abortion with no exceptions in cases of rape and incest.⁶ Given the fact that even in states with exceptions, legal proof and other requirements can make abortions impossible, this is alarming to say the least. 97% of rapists are not prosecuted: this speaks to the legal barriers most women will face in seeking justice and freedom from the trauma of carrying a pregnancy caused by rape, even in states with exceptions. “Another key reason that rates of unintended pregnancy are high is abuse, violence, and other problems in intimate partner relationships. Intimate partner violence (IPV), although common throughout the US, is significantly more common among younger women living in poverty, transgender women, and those in historically marginalized racial/ethnic groups.”²⁸ Women who experience IPV have lower odds of using contraception, have less condom use, and use condoms less consistently.²⁹ As a result, unintended pregnancy rates are significantly higher among women experiencing IPV.²⁹ In cases of rape and incest, women in unprotected states are forced to carry and birth the baby of their rapists; endure nine months of psychological pain and likely long-term trauma from this injustice, before the trauma of deciding whether to keep the child given the horrific circumstances or give the child up for adoption. No person should be put through this pain, nor

⁵ White, K., Kumar, B., & Goyal, V. (2023). Abortion policy in the United States: The new legal landscape and its threats to health and socioeconomic well-being. *American Journal of Public Health*, 113(5), 461–464. <https://doi.org/10.2105/AJPH.2023.307325>

⁶ Donovan, M. K. (2023, July 18). A closer look at rape and incest exceptions in states with abortion bans and early gestational restrictions. *KFF*. <https://www.kff.org/policy-watch/rape-incest-exceptions-abortion-bans-restrictions/>

⁷ White, K., Kumar, B., & Goyal, V. (2023). Abortion policy in the United States: The new legal landscape and its threats to health and socioeconomic well-being. *American Journal of Public Health*, 113(5), 461–464. <https://doi.org/10.2105/AJPH.2023.307325>

is there any moral righteousness or beauty in forcing women to give birth or become mothers under these tragic circumstances.

There is a contradiction worthy of reflection in the pro-life arguments when the mother's life is put below the unborn child. Pro-life advocates for the "protection of every life," yet extreme bans ignore the same right for women after their pregnancy begins, putting women's physical safety and lives at risk as well as their bodily autonomy, leading to increased mortality for both women and their children. A reversed morality seems to occur in those with extreme pro-life stances, when abortion is generalized and villainized, or policy is made with tunnel vision on abortion, undermining or justifying the harm and even loss of life caused to women as a result of rigid bans. Under extreme or total bans, the woman's life becomes less valuable than the unborn child's and is forcibly "sacrificable" after conception if there becomes a medical risk, even if the child is unlikely to survive shortly after birth. We must acknowledge the gravity of what these bans will mean for individuals in different circumstances, and better prioritize women's right to life.