



POLICY BRIEF

# GUARANTEE THE RIGHT TO ABORTION AND ENSURE ACCESS

## THE PROBLEM

Abortion is an essential part of full-spectrum reproductive health care. Meaningful access to abortion is also fundamental to pregnant people's liberty, equality, and economic security. [One in four women\\*](#) will need an abortion in her lifetime. Everyone, no matter where they live or their financial means, should have access to abortion when they need it, in their communities, without stigma, shame, or barriers.

But people's ability to access abortion was thrown into chaos when the Supreme Court unjustly took away our federal constitutional right to abortion, a right that was fundamental to our health, lives, futures, and society for nearly 50 years. Within roughly two months of the Supreme Court's decision, [17 million women](#) lost access to abortion. By the end of 2023, nearly half of states had banned abortion or made it inaccessible.

The harm of abortion bans [disproportionately impacts communities of color](#) and those who have low incomes—people who already face challenges in accessing health care, and who often lack job security and paid leave, which further compounds the harms they already experience, including poverty and systemic racism. Some people are not able to overcome the hurdles of accessing care, which ultimately means that they are forced to carry their pregnancies to term, resulting in lifelong consequences for them and their families. Denying a pregnant person an abortion can create economic hardship and insecurity and health [consequences](#) that last for years.

And yet, anti-abortion extremist lawmakers are relentless, threatening anyone and everyone who plays any role in abortion access, creating legal uncertainty and fear for pregnant people, loved ones, abortion providers and other health care professionals, employers, universities and schools, businesses, and city governments, among others.

## THE SOLUTION

It has never been more critical that state lawmakers act boldly and swiftly to guarantee and ensure the right to abortion and people's ability to access abortion care. Even in states with protected access to abortion, state lawmakers can take action to expand access to care by eliminating existing barriers or thinking creatively about how to meet existing needs. Not only can lawmakers work to ensure that abortion is broadly legal, accessible, and affordable, they can work to tackle new or exacerbated issues, like improving security for pregnant people and providers, protecting them from discrimination and civil, criminal, and professional ramifications, mitigating the harm of anti-abortion centers, and addressing refusals of abortion care.

We know that abortion access is best realized when policy change is informed by local reproductive rights, health, and justice advocates, abortion providers, people from impacted communities, and researchers. While this document provides suggestions, it is important for lawmakers to connect with the relevant local stakeholders to develop recommendations for legislation that best responds to the specific needs in a particular state.

- **Ensure the right to abortion is enshrined in state law**, particularly under a broad right to reproductive freedom and equality, whether by statute or constitutional amendment.
- **Decriminalize abortion and pregnancy outcomes**, including the provision of abortion care, actions that assist people to access abortion care, and outcomes of the person seeking a medically assisted or self-managed abortion.
- **Repeal any existing state abortion restrictions or bans, including:**
  - Any gestational limit;
  - Laws that ban or criminalize abortion, including self-managed abortion;
  - Medically unnecessary and burdensome restrictions on abortion providers and on clinics, including those that restrict access to medication abortion;
  - Laws that require parental involvement and restrict young people's access to care;
  - Measures meant to shame and judge people who have decided to have an abortion, such as mandatory delays and biased counseling requirements; and
  - Refusal of care laws that allow health care providers' personal beliefs to override a patient's access to abortion care.
- **Expand who can provide abortion care, including by:**
  - Repealing any laws that require that abortions are provided only by physicians;
  - Making explicit that [advanced practice clinicians](#) can provide abortion;
  - Expediting the licensure of abortion providers; and
  - Expanding access to abortion training, including creating state grants to train abortion providers.
- **Expand medication abortion access**, such as requiring public universities to provide medication abortion, and by protecting and expanding access to telemedicine.

- **Remove funding barriers and ensure abortion is affordable, including:**
  - Allocating funds to help in-state and out-of-state abortion patients pay for care or practical support or directly subsidize abortion clinics and funds;
  - Improving insurance coverage of abortion care in both private and public plans, including by:
    - Providing [Medicaid funding](#) for abortion care, improving Medicaid reimbursement rates, and streamlining the process for becoming a state-Medicaid eligible provider and for billing and reimbursement of claims;
    - Requiring insurance coverage of abortion for in-person and telehealth abortions and for in and out-of-network abortion care, without limit on the number of abortions;
    - Eliminating cost-sharing for abortion and abortion-related services, including for telehealth abortions; and
    - Establishing gap coverage for people lacking coverage for abortion.
- **Prohibit employment discrimination against employees for their reproductive decisions,** including for having abortions, having sex outside of marriage, using assisted reproductive technology, or using birth control.
- **Improve security for abortion patients, abortion providers, and those who help people get abortions, such as by:**
  - Expanding data shield laws to include abortion providers;
  - Directly granting funds to clinics so they may invest in their own security enhancements;
  - Bolstering data privacy protections of abortion seekers, abortion providers, helpers, and organizations that assist those seeking abortions; and
  - Removing requirements to ask for a patient’s address.
- **Protect clinicians from civil or criminal liability or professional repercussions when providing legal abortion, including by:**
  - Prohibiting out-of-state subpoenas or extradition to a hostile state;
  - Refusing to participate in other state’s investigations of pregnancy outcomes and abortions that are legal in the state;
  - Prohibiting tech companies from handing over sensitive or identifiable information to law enforcement;
  - Prohibiting the sale of sensitive data and identifiable information, including by data brokers; and
  - Prohibiting medical malpractice insurance companies or medical boards from taking any adverse action against a reproductive health care clinician who provides reproductive health care that is legal in their state.
- **Protect clinicians from employment discrimination, including by:**
  - Protecting clinicians who “moonlight” as abortion providers, clinicians who provide abortion care or information about and referrals for abortion care, and clinicians and clinical students who speak publicly about their support for abortion care from being fired or otherwise facing repercussions from their primary or current employer;
  - Preventing hospitals from denying admitting privileges to a doctor just because they are an abortion provider or are willing to provide abortion care; and
  - Preventing clinicians and clinical students from employment consequences—such as rescinding a job offer or being denied residency—because of previous abortion provision, training, or their support for abortion care.

- **Address refusals to provide abortion and other health care, including by ensuring that:**
  - Hospital mergers do not result in communities losing access to reproductive health care services;
  - Institutional hospital policies that deny treatments, such as abortion or gender-affirming care, for non-medical reasons are transparent and disclosed to patients; and
  - At a minimum that patients receive emergency pregnancy care, including abortion.
- **Advocate for comprehensive sex education policies** that require medically accurate, age-appropriate, inclusive, and non-stigmatizing instruction regarding all reproductive health care options, including abortion.
- **Mitigate the harm of anti-abortion centers (AACs),** also known as crisis pregnancy centers (CPCs), including by:
  - Ending state funding of AACs;
  - Ending any tax benefit that has been given specifically for donations to an AAC;
  - Investing in community-based models that provide pregnancy- and baby-care-related resources, such as free pregnancy tests and diapers, to those who need them; and
  - Increasing public education efforts on the danger of AACs, ensuring materials and resources are accessible, understandable, and available in (at least) the area’s top five most common languages.
- **Encourage workplaces to support access to reproductive health care and justice programs,** including by offering paid sick leave and paid medical and family leave for pregnancy-related care needs, including pregnancy loss and obtaining an abortion; providing comprehensive health insurance that includes abortion coverage; ensuring that workers who need to travel for abortion care are supported with travel costs and other relevant benefits, like childcare costs; and creating an emergency fund for employees for costs associated with accessing abortion.

## TALKING POINTS ON THE SOLUTION

[Click here for resources to help you speak your values](#) when fighting for policy change and be sure your [messaging](#) is free from abortion stigma.

- **It is more critical than ever that we act to ensure abortion access.**
- **State lawmakers play a key role in protecting those seeking and providing abortion care** and mitigating and reversing the harm and chaos created by the Supreme Court and anti-abortion lawmakers.
- **Connecting abortion to autonomy, freedom, health, and equality:**
  - We all deserve to live a safe and healthy life—and that means ensuring people have access to health care, including abortion care.
  - One of the most important life decisions we will ever make is whether to become a parent. Let’s trust people to make decisions that are best for their lives and their bodies.
  - We aren’t truly free unless we can control our own bodies, lives, and futures. Our laws should protect our rights, not try to control and dehumanize us.
  - Women can’t be truly equal if they don’t have control over their own bodies and reproductive lives, including the decision about whether to have an abortion.

## Communities Impacted:

- We know who is most impacted by abortion bans: the communities that already bear the brunt of systemic inequities, disinvestment, disparities, and discrimination—Black, Indigenous, and other people of color (BIPOC), those with lower incomes, LGBTQI+ people, young people, people living in rural areas, people with disabilities, immigrants, and people in abusive relationships or those that have suffered violence.
  - **More than 6.7 million Black women**—57% of all Black women ages 15 to 49—live in the 26 states that have banned or are likely to ban abortion.
- Being forced to carry a pregnancy to term poses particular harms for marginalized communities, especially Black women. Black women are **three times** more likely to die from a pregnancy-related cause than white women. **Indigenous women** have also been shown to have an increased rate of pregnancy-related mortality.
  - **Nearly 55% of all Black women** of reproductive age live in a state that has both banned or is likely to ban abortion and has above average maternal mortality.

## Economic Impact:

- People have more control over their **economic security** when they can make their own decisions about their bodies and what's best for their families. These decisions affect their financial well-being, job security, and their ability to work and go to school.
- Being denied an abortion really hurts people's financial well-being, and people of color are disproportionately living in poverty or facing economic insecurity. People who are denied an abortion are **nearly four times more likely to live below the poverty line at six months after giving birth**. Studies also show that being denied an abortion **increases the amount** of debt people are in, as well as the rate of bankruptcies and evictions.
  - Roughly **six in 10 Black women** who are economically insecure live in states that have banned or are likely to ban abortion and states that have above-average maternal mortality rates.
- Restricting abortion access **hurts workers** because being forced to continue a pregnancy may expose a worker to the risk of pregnancy discrimination and lead to income or job loss.
- Studies show clear links between access to abortion and **higher participation** in the workforce and economic independence for women. Access to abortion care increases people's ability to plan for their future careers and lives.

## PUBLIC POPULARITY

- According to a 2024 **Kaiser Family Foundation poll**, 69% of voters think abortion should be legal in all or most cases.
- According to a 2023 **CNN poll**, six in 10 adults said politicians in their state's government who support legalizing abortion are not doing enough to ensure abortion access.
- According to a 2024 **Pew Research Center survey**, a **majority of Americans** strongly agree that “the decision about whether to have an abortion should belong solely to the pregnant woman.”
- According to a **Economist/YouGov poll**, 76% of adults believe the issue of abortion is important, including 82 to 90% of 18 to 29-year-olds.

## STATES THAT HAVE PASSED THESE POLICIES

Following the Dobbs decision, at least [26 states and D.C.](#) passed laws that protect, restore, or expand access to abortion. Examples include:

- In every state where abortion appeared on the ballot in the two years after the Dobbs decision—California, Kansas, Kentucky, Michigan, Vermont, and Ohio—people have voted in favor of protecting abortion rights and access. In 2024, at least another [nine states](#) certified or advanced ballot initiatives for the November 2024 election that would protect abortion access.
- In 2023, 31 state laws were enacted to repeal abortion restrictions. By mid-year in 2024, 70 state bills had been introduced to repeal abortion restrictions, including successful legislation in [Arizona](#), which repealed a historic abortion ban, and [Utah](#), which repealed a law that required abortions to take place within a hospital.
- By mid-2024, [seven states](#) had enacted state laws that create state funding support of abortion access, including grant programs that fund access to abortion and security of reproductive health clinics.
- At least [22 states and the District of Columbia](#) have “shield” laws that protect abortion providers, such as laws that protect clinicians from civil or criminal liability or professional repercussions when providing legal abortion.
- At least five states, including [California](#), [Washington](#), [Illinois](#), [Maryland](#), and [Virginia](#), have passed laws that offer protections to patient’s reproductive health data.
- At least two states, including [Colorado](#) and [New York](#), passed or advanced legislation that would require transparency around certain hospital refusals of care.

\* While we refer to women here to reflect the relevant data, we recognize that individuals who do not identify as women, including transgender men and nonbinary persons, also may become pregnant and need abortion access.