Abortion in the United States is an extremely safe procedure. Restrictions imposed in some states are not based on medical evidence and do nothing to improve safety. The Supreme Court has confirmed that such restrictions stand in the way of safe reproductive care.

In June 2016, the US Supreme Court struck down parts of a Texas law that imposed multiple abortion restrictions. The law required abortion providers to obtain hospital admitting privileges and meet specifications to become an ambulatory surgical center—essentially a mini-hospital.

Evidence was front-and-center in the Court’s decision, including the abundance of research proving that abortion is a safe medical procedure. Evidence also shows that restricting access to abortion care does not improve safety and puts women’s health and well-being at risk.

Abortion is a safe medical procedure
The safety of abortion in the US is extensively documented:

- Major complications are rare, occurring in less than ¼ of one percent of procedures,² which is safer than having wisdom teeth removed.
- Abortions performed in a variety of clinical settings—including doctors’ offices, clinics and hospitals—are safe.

Given this safety record, the Court agreed that there is no medical evidence to support the need for admitting privileges or ASC standards.³,⁴ In fact, many medical procedures riskier than abortion are offered outside of ASCs by providers without admitting privileges.⁵

Compromising women’s health & well-being
The Court also cited that after Texas enacted some parts of its law, the number of abortion facilities decreased by almost half.⁶ Women subsequently reported multiple barriers to obtaining safe abortion care, including increased travel time, longer waits times and greater costs.⁷
Delivering or effectively blocking abortion care also puts women’s health at risk. When a woman has no option but to obtain an abortion later in pregnancy, major complications are more likely and costs are higher. Additionally, research shows that carrying an unwanted pregnancy to term is more dangerous to a woman’s health than abortion.

Furthermore, abortion does not negatively impact a woman’s well-being. Contrary to claims, abortion does not place women at risk for post-traumatic stress disorder, depression, low self-esteem or anxiety. Nor does it increase women’s drug, tobacco or alcohol use. Over 95% of women report that abortion was the right decision for them. One year later, women who obtained abortion care were more likely to have a positive outlook on life than women denied this care.

Abortion restrictions may put a woman’s physical and emotional safety at risk. Limited abortion access may result in more women being unable to terminate unwanted pregnancies, keeping them in contact with violent partners. This puts both women and their children at increased risk of violence.

A significant burden on women
The Court confirmed that unnecessary abortion restrictions place a burden on women. A study in Louisiana found the state’s admitting privileges law would result in widespread clinic closures, more than tripling the average distance traveled for abortion care—from 58 to 208 miles. The expense of abortion care is already very high for some women; these types of restrictions may unfairly make it accessible to only the wealthy.

Limited access to abortion makes it likely that self-induction will become more common. Misoprostol is a medically safe way to self-induce abortion, but it is not readily available in the United States. Women are turning to less effective and more dangerous methods—including taking herbs and inflicting abdominal trauma.

A victory for evidence-based care
The Supreme Court’s decision affirms the role of rigorous research in shaping health policies, including those that determine women’s access to safe, evidence-based reproductive health care.