



An Update to ACP's *Women's Health Policy in the United States*

Approved by the Executive Committee of the Board of Regents on behalf of the Board of Regents on May 23, 2022

ACP has long advocated for increasing comprehensive access to health care services and believes that abortion services are an important component of comprehensive reproductive health care services. In its 2018 position paper, [*Women's Health Policy in the United States*](#), ACP adopted policy in support of an individual's right to choose whether or not to continue a pregnancy "as defined by existing constitutional law." With this position statement, ACP is affirming that such reproductive health care decisions are foundational to the patient-physician relationship and should be made between a patient and their physician, without medically unnecessary political interference from governments. At the time of publication, federal abortion protections were supported by prior case law in the cases of *Roe v. Wade* and *Planned Parenthood of Southeastern Pennsylvania v. Casey*. *Roe v. Wade* established a framework in which decisions about abortion in the first trimester should be left to the medical judgment of a woman and her physician but in which states may have a greater interest in protecting the health of the mother and "potentiality of human life" during the second and third trimesters and could impose stronger regulations (second trimester) or regulations and bans (third trimester). A decision in *Planned Parenthood of Eastern Pennsylvania v. Casey* in 1992 established the undue burden standard, which allows states to regulate abortion procedures in the first trimester as long as they do not put a "substantial obstacle in the path of a woman seeking an abortion before the fetus attains viability," superseding the language in the *Roe v. Wade* decision.

Since *Roe*, states have continued to pursue implementing restrictions and bans on abortion care, hoping to bring a case to the Supreme Court of the United States that would overturn *Roe v. Wade* and *Planned Parenthood of Eastern Pennsylvania v. Casey* and allow states to impose bans or restrictions on abortion prior to fetal viability and eliminate the undue burden standard. The Supreme Court decided to take up the case of *Dobbs v. Jackson Women's Health Organization*, which would ban abortion after 15 weeks. On June 24, 2022, the Supreme Court ruled in favor of Mississippi and reversed *Roe v. Wade* and *Planned Parenthood of Eastern Pennsylvania v. Casey*, eliminating any federal constitutional right to abortion, giving the states

the authority to regulate or ban abortion at any stage of pregnancy. Because of this ruling, ACP has made modest updates its policy to ensure the original intent continues to be conveyed as there is no longer a constitutional right to abortion. Specifically, the update strikes the reference to “existing constitutional law,” (the now overturned *Roe v. Wade* and *Planned Parenthood of Eastern Pennsylvania v. Casey* decisions) while affirming its original and continued policy of supporting a patient’s autonomy on matters affecting individual health and reproductive decision making rights, including about types of contraceptive methods they use and whether or not to continue a pregnancy. It also makes minor editorial revisions. It does not change any other aspect of ACP policy as stated in the 2018 paper. Based on this updated policy, ACP will continue to oppose any new restrictions arising from the *Dobbs* decision that are not in accord with the now updated 2018 paper.

- 3. ACP believes in respect for the principle of patient autonomy on matters affecting individual health and reproductive decision-making rights, including about types of contraceptive methods they use and whether or not to continue a pregnancy. ACP believes that individuals have the right to make their own decisions, in partnership with their physician or health care professional, on matters affecting their individual reproductive health and opposes government restrictions that would erode or abrogate one’s right to continue or discontinue a pregnancy that may result from the Supreme Court ruling in *Dobbs v. Jackson Women’s Health Organization*. Individuals should have sufficient access to evidence-based family planning and sexual health information and the full range of medically accepted forms of contraception.**