More Than 75 Health Care Organizations Release Joint Statement in Opposition to Legislative Interference

Washington, D.C.—The following is a statement from the American College of Obstetricians and Gynecologists and the American Medical Association, joined by the Alliance for Academic Internal Medicine; American Academy of Family Physicians; American Academy of Nursing; American Academy of Pediatrics; American Association of Child and Adolescent Psychiatry; American Association of Public Health Physicians; American Board of Anesthesiology; American Board of Internal Medicine; American Board of Internal Medicine Foundation; American Board of Medical Genetics and Genomics; American Board of Medical Specialties; American Board of Obstetrics and Gynecology; American Board of Plastic Surgery; American Board of Psychiatry and Neurology; American Board of Surgery; American College of Correctional Physicians; American College of Medical Genetics and Genomics; American College of Nurse-Midwives; American College of Osteopathic Obstetricians and Gynecologists; American College of Physicians; American College of Preventive Medicine; American Epilepsy Society; American Geriatrics Society; American Gynecological and Obstetrical Society; American Medical Student Association; American Medical Women's Association; American Muslim Health Professionals; American Psychiatric Association; American Public Health Association; American Society for Clinical Pathology; American Society for Reproductive Medicine; American Society of Addiction Medicine; American Society of Colon & Rectal Surgeons; American Society of Hematology; American Thoracic Society; American Urogynecologic Society; Association for Clinical Oncology; Association of American Indian Physicians; Association of American Medical Colleges; Association of Professors of Gynecology and Obstetrics; Association of Women's Health, Obstetric and Neonatal Nurses; Black Mamas Matter Alliance, Inc.; Council of Medical Specialty Societies; Council of University Chairs of Obstetrics and Gynecology; Endocrine Society; GLMA: Health Professionals Advancing LGBTQ Equality; Infectious Diseases Society for Obstetrics and Gynecology; International Society for the Study of Women's Sexual Health; March for Moms; Massachusetts Medical Society; Medical Students for Choice; National Abortion Federation; National Association of Nurse Practitioners in Women's Health; National Birth Equity Collaborative; National Hispanic Medical Association; National Medical Association; New York Academy of Medicine; North American Society for Pediatric and Adolescent Gynecology; North American Society for Psychosocial Obstetrics & Gynecology; Physicians for Reproductive Health; Ryan Residency Training Program in Abortion and Family Planning; Society for Academic Specialists in General Obstetrics and Gynecology; Society for Adolescent Health and Medicine; Society for Maternal-Fetal Medicine; Society for Obstetric Anesthesia and Perinatology; Society for Reproductive Endocrinology and Infertility; Society for Reproductive Investigation; Society of Family Planning; Society of General Internal Medicine; Society of Gynecologic Oncology; Society of Gynecologic Surgeons; Society of Hospital Medicine; Society of OB/GYN Hospitalists; Student Osteopathic Medical Association; and Womxn's Health Collaborative:

“As the U.S. health care system enters a post-Roe era, we, representing dozens of major organizations of health care professionals, oppose all legislative interference in the patient–clinician relationship. Our patients need to be able to access—and our clinicians need to be able to provide—the evidence-based care that is right for them, including abortion, without arbitrary limitations, without threats, and without harm.

“The wave of abortion bans going into effect in states across the country will harm patients, impair the
integrity of the medical profession, and have a devastating and unquantifiable impact on the patients and clinicians it affects. People in at least half the states will now face a cruel choice between traveling hundreds of miles to receive abortion care (which is simply impossible for those who lack the resources, means, and opportunity) or being forced to continue with a pregnancy that may threaten their health, well-being, and future.

“Clinicians who practice in good faith in these states will be subject to a similarly untenable decision: risk criminal prosecution or other civil sanctions by providing appropriate, evidence-based care in accordance with their patients’ needs and wishes or withhold safe and effective reproductive health care from patients in need.

“Banning abortion care is a decision not founded in science or based on evidence. In all facets of medicine, clinicians train for years—some for decades—to learn how to provide the best evidence-based care possible to their patients. Patients form trusting relationships with their health care professionals, but when health care professionals are prevented from providing the full spectrum of care by threat of legal action, the quality and scope of care they can provide is limited, endangering both patient care and the patient–clinician relationship. Just as patients should not be forced to leave their communities to access abortion care, clinicians should not be forced to uproot their lives and leave their homes in order to practice in safe, supportive environments. Restricting access to care and eroding the trust between patients and health care professionals will worsen existing gaps in health disparities and outcomes, compounding the harm that underresourced communities already experience.

“Abortion care is safe and essential reproductive health care. Keeping the patient–clinician relationship safe and private is essential not only to quality individualized care but also to the fabric of our communities and the integrity of our health care infrastructure. As leading medical and health care organizations dedicated to patient care and public health, we condemn this and all interference in the patient–clinician relationship.”