



**From:** National Partnership for Women & Families  
**To:** Interested Persons  
**Date:** March 3, 2016  
**Re:** 251 Anti-Abortion Restrictions Introduced in 37 States Based on Lies

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Over the past five years, anti-abortion legislators have quietly passed hundreds of restrictive abortion laws. These laws try to prevent a woman from getting abortion care, even when that means lying to her, delaying her care, requiring unnecessary tests, making care more expensive, and shutting down reproductive health clinics.

Some legislators are transparent and acknowledge that the bills they support are designed to stop abortion altogether (such as outright abortion bans), but others are not. As a result, a large majority of abortion restrictions are promoted under the guise of supporting “women’s health” or “informed consent,” using lies about abortion, about women who decide on abortion and about the trusted health care professionals who provide abortion care. All these restrictions share the same goals: restrict access to abortion care and shame women.

A new analysis by the National Partnership for Women & Families found that of the 353 anti-abortion restrictions introduced in state legislatures in 2016, 251 restrictions in 37 states<sup>1</sup> are based on common anti-choice lies. (Analysis based on data from the Guttmacher Institute.)

The National Partnership’s analysis found:

**150 restrictions** have been introduced in 30 states<sup>2</sup> that are based on fundamental lies about abortion and abortion providers (including lies about abortion safety and the physical and mental health impacts of abortion).

Examples include:

- ▶ A bill in New York that would require an abortion provider to give a woman seeking abortion care medically inaccurate information, including the lie that abortion increases the risk of breast cancer, although that has been debunked by the American Cancer Society<sup>3</sup>, and that abortion has negative psychological consequences, which has been debunked by the American Psychological Association.<sup>4</sup>

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1 Alabama, Arizona, Colorado, Florida, Georgia, Hawaii, Illinois, Idaho, Indiana, Iowa, Kansas, Kentucky, Massachusetts, Maryland, Michigan, Minnesota, Mississippi, Missouri, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Virginia, Nebraska, Vermont, Washington, West Virginia, Wisconsin, and Wyoming. The Montana, Nevada, North Dakota and Texas legislatures do not meet this year.

2 Alabama, Arizona, Colorado, Florida, Hawaii, Illinois, Indiana, Iowa, Kentucky, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Rhode Island, South Carolina, South Dakota, Tennessee, Virginia, West Virginia, Wisconsin, and Wyoming.

3 American Cancer Society. (2014, June). *Is Abortion Linked to Breast Cancer?* Retrieved 29 February 2016, from <http://www.cancer.org/cancer/breastcancer/moreinformation/is-abortion-linked-to-breast-cancer>; National Cancer Institute. (2010, January 12). *Abortion, Miscarriage, and Breast Cancer Risk*. Retrieved 29 February 2016, from <http://www.cancer.gov/types/breast/abortion-miscarriage-risk>

4 American Psychological Association Task Force on Mental Health and Abortion. (2008). *Report of the APA Task Force on Mental Health and Abortion* (p. 92). Retrieved 29 February 2016, from <http://www.apa.org/pi/women/programs/abortion/mental-health.pdf>

- ▶ A bill in Florida designed to shut down reproductive health clinics and prevent trusted health care professionals from providing abortion care based on lies about abortion safety. These types of laws are opposed by leading medical groups because the truth is that abortion is one of the safest medical procedures performed in the United States.<sup>5</sup>

**101 restrictions** have been introduced in 25 states<sup>6</sup> that are based on lies about women who decide on abortion. The restrictions are based on the lie that a woman is not capable of making a private medical decision about abortion without state intervention, or that she will feel only regret. These laws aim to shame women and make abortion more stressful and difficult to obtain. In truth, the overwhelming majority of women who decide on abortion feel it was the right decision for them<sup>7</sup> and made their decision prior to making an appointment with a provider.<sup>8</sup>

Restrictions based on these lies about women include:

- ▶ A bill in Alabama that would force a woman to get an ultrasound, even if it's not needed, and force the abortion provider to give a detailed description, even if the woman doesn't want to hear it.
- ▶ A bill in Indiana that would more than double the state's mandatory delay period, forcing a woman to wait even longer to obtain care.

Lies are being turned into laws in states across the country, and it must stop.

The National Partnership believes that a woman who decides on abortion should be able to access care based on medically accurate information and without shame or pressure. We must allow health care providers to care for patients based on their medical expertise without interference from politicians. We can't allow politicians to continue to make abortion more difficult to obtain.

There is no place for lies in health care, and that includes women's health care.

Get the facts at [www.BadMedicine.org/Lies](http://www.BadMedicine.org/Lies).

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5 Brief for Am. Coll. of Obstet. & Gyn., Am. Med. Ass'n, Am. Acad. of Family Phys., Am. Osteopathic Ass'n & Am. Acad. of Pediatrics as Amici Curiae Supporting Petitioners, p.6, *Whole Woman's Health v. Hellerstedt*, No. 15-274 (filed Jan. 4, 2016).

6 Alabama, Arizona, Colorado, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Nebraska, New Jersey, New York, Oklahoma, Oregon, South Carolina, Tennessee, Vermont, Virginia, Washington, and West Virginia.

7 Rocca, C.H., Kimport, K., Roberts, S.C.M., Gould H., Neuhaus J., & Foster DG. (2015). Decision Rightness and Emotional Responses to Abortion in the United States: A Longitudinal Study. *PLoS ONE*, 10(7).

8 Moore, A.M., Frohvirth, L., & Blades, N. (2011). What Women Want From Abortion Counseling in the United States: A Qualitative Study of Abortion Patients in 2008. *Social Work in Health Care*, 50(6); Greene Foster, D., Gould, H., Taylor, J., & Weitz, T. (2012, June). Attitudes and Decision Making Among Women Seeking Abortions at One U.S. Clinic. *Perspectives on Sexual and Reproductive Health*, 44(2).