

# Forty years after *Roe v. Wade*: Abortion rights under sustained attack

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*Roe v. Wade*, the landmark US Supreme Court decision of January 22, 1973, changed abortion laws across all 50 US states almost overnight. Previously, abortion was banned in 44 of the states, but in its wake, abortion was made legal across the nation.

Four decades later, although polls show that a solid majority of Americans support the *Roe v. Wade* decision, abortion rights are facing a sustained attack. This assault on women's reproductive rights—led by the religious right and supported by politicians from both big business parties—is having a profound effect on the accessibility of abortion and other health services, particularly for working class women.

In its first term, the Obama administration kowtowed before the anti-abortion and fundamentalist lobby, acceding to Christian fundamentalists and the Catholic Church on a range of issues, including abortion rights and access to emergency contraceptives for young women.

Statistics from Centers for Disease Control and Prevention (CDC) from 2008 to 2009 show that the abortion rate dropped 5 percent during those years (the most recent years for which data is available), the largest decline in the past decade. There is no consensus on the reasons behind this drop. Some research attributes this to the growth in the use of longer-acting reversible contraceptives such as intrauterine devices.

Another explanation is the impact of the recession, placing the cost of terminating an unwanted pregnancy—estimated at between \$350 and \$550 for a first trimester procedure—out of reach for growing numbers of working class women. The raft of anti-abortion legislation being proposed and enacted in a number of states across the country is also increasing the difficulty women face obtaining an abortion, as

well as accessing contraceptives and health care screenings.

Abortion providers and clinics have also faced violent attacks. In May 2009, for instance, Dr. George Tiller, an abortion provider in Wichita, Kansas, was shot to death at his church. He was previously shot by an anti-abortion fanatic in 1993, and his practice was bombed in 1985. At trial, the murderer testified at length about his efforts to destroy Dr. Tiller and his clinic and attempted to justify the killing on the basis of religious hostility to abortion.

Abortion rates have decreased since the 1980s, suggesting a correlation with the decline in providers as well as restrictions to abortion access. Statistics also show a dramatic shift from white women to minority women receiving abortions and a significant increase in the number of lower-income women receiving abortions. The increase in attacks on abortion providers and restrictions placed on attaining abortions therefore threatens to disproportionately affect poorer women.

Since 2011, the number of restrictions placed on abortion rights has been astonishing. According to Wonkblog, state legislatures passed 135 laws restricting abortion rights in 2011 and 2012 alone. Most of these restrictions target minors through requirements for parental involvement and extended waiting periods. Other attacks have come in the form of limiting abortion coverage by insurance companies, the banning of so-called partial birth abortion, mandatory ultrasounds being performed and shown to the mothers, and bans on post-20-week abortions.

In March 2012, legislation was signed into Virginia law requiring abdominal ultrasounds for women seeking abortion. After the ultrasound, the woman must wait a 24-hour period before the procedure is actually provided. While they are not forced to view the

ultrasound, abortion patients are also required to sign a form stating that they were given the opportunity to see the image, confirm the fetus's gestational age, and hear its heartbeat.

In June 2012, the Michigan House of Representatives passed a bill that would increase operating costs for abortion providers by reclassifying facilities that offer this service as "outpatient surgical facilities," even if no surgical procedures are carried out. Such clinics are subject to expensive licensing and regulatory requirements. These clinics are also required to carry \$1 million more in liability insurance.

Less than one month ago, a Texas state judge ruled that the state can cut off funding to Planned Parenthood's family planning programs. Thousands of women are now forced to seek alternative state-approved doctors for annual exams, cancer screenings, and contraceptives. The same judge also ruled that the state could cut funding to doctors and clinics who advocate for abortion rights. Texas authorities have thus willingly cut off tens of millions of dollars in federal funds for women's health care services to advance their anti-abortion agenda.

The Obama administration is no stranger to these restrictions. In early 2010, President Barack Obama signed an executive order to uphold abortion restrictions, prohibiting the use of federal funds to pay for any abortion or to "cover any part of the costs of any health plan that includes coverage of abortion" except in cases of rape, incest, or danger to the mother.

Obama signed the order as a concession to a group of anti-abortion Democrats who had threatened to vote against his health care legislation. This enforcement of already existing restrictions stemming from the Hyde Amendment of 1976 reveals the administration's pandering to the right-wing anti-abortion bloc. These restrictions also serve to discourage insurers from offering plans that cover abortions.

Despite all of the attacks and right-wing propaganda, a recent Pew poll shows that general sentiment in the population does not match up with these views: 53 percent think that the abortion debate is unimportant compared to other issues, while only 18 percent of Americans think that abortion is a critical issue. The poll found that 63 percent of the population believe that the Supreme Court should not overturn *Roe v. Wade*. These statistics represent every age, education and race

group.

Other research examining the effects of abortion law restrictions in other countries illustrates even further the results of such legislation. According to a study in the *Lancet*, countries with more-liberal abortion laws have lower rates of abortion procedures performed while those with more restrictions report more abortion-related deaths. The steady assault on abortion rights in the wake of *Roe v. Wade*, which has escalated in recent years, will undoubtedly result in increased suffering for working class women, as well as needless deaths.

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