

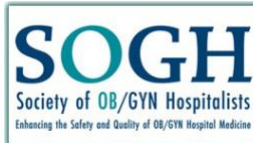
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TRANSCENDING STRATEGIES

# Criminalization and Punishment of Pregnant People and People Who Facilitate Access to Abortion Care

## Submitting Stakeholders:<sup>i</sup>

**Human Rights and Gender Justice Clinic (HRGJ), City University of New York School of Law** (est. 1992), [law.cuny.edu/academics/clinical-programs/hrgj/](http://law.cuny.edu/academics/clinical-programs/hrgj/), contact: Cynthia Soohoo, [cynthia.sooahoo@law.cuny.edu](mailto:cynthia.sooahoo@law.cuny.edu),

**If/When/How: Lawyering for Reproductive Justice** (est. 2003), [ifwhenhow.org](http://ifwhenhow.org), Contact: Farah Diaz-Tello, [farah@ifwhenhow.org](mailto:farah@ifwhenhow.org)

**Pregnancy Justice** (est. 2001), [pregnancyjusticeus.org](http://pregnancyjusticeus.org), contact: Kulsoom Ijaz, [kulsoom.i@pregnancyjusticeus.org](mailto:kulsoom.i@pregnancyjusticeus.org)

**Additional Stakeholders:**<sup>ii</sup> Abortion Care Network, Indigenous Women Rising, Society of OBGYN Hospitalists, Transcending Strategies LLC

**Description of Stakeholders:** The submitting stakeholders are legal advocacy NGOs that provide direct legal representation, engage in research examining trends in criminalization, and advocate for policies that affirm the rights of pregnant individuals. Through this work, the submitting stakeholders have a firsthand understanding of the consequences experienced by their clients under U.S. policies that criminalize people based on their pregnancy outcomes or their support of people seeking abortion care.



## Introduction and Issue Summary

1. Access to sexual and reproductive health care, including abortion care has long been an issue in the United States. During the 2d and 3d Cycle UPR reviews, multiple countries recommended that the U.S. take steps to ensure access to sexual and reproductive health care. Although the U.S. accepted these recommendations, the loss of federal constitutional protection for abortion access in 2022 and Donald Trump's return to the White House in 2025 have resulted in a major retrogression in sexual and reproductive rights. Not only has the Trump Administration dismantled federal efforts to support abortion access, it has refused to enforce laws protecting abortion clinics and guaranteeing emergency medical care in cases where obstetric emergencies require abortion care.

2. The new administration has also emboldened state and local officials to use their legislative and police powers to criminalize people for the outcomes of their pregnancies, including but not limited to abortion, and to seek to prosecute people who have, provide or help people access abortion. Other stakeholder reports will focus on the profound impact on abortion access, sexual and reproductive health, and maternal health as well as the plight of healthcare providers in this new environment.

3. This report focuses specifically on the use of criminal and civil penalties to prosecute and punish people based on their pregnancy status or their pregnancy outcomes, including abortions, and the people who help them receive abortion care. Human rights bodies emphasize that criminal sanctions should never be imposed on people who have abortions or those who assist them, and in the past three years specifically recommended that the U.S. take steps to end this practice. Yet, over 30 states have criminal abortion laws and in many parts of the U.S. the threat of the use of criminal and civil penalties to punish people for pregnancy outcomes and those who help them has dramatically increased.

### **I. Summary of Prior Recommendations to the United States**

4. U.N. bodies have long recognized that reproductive rights are systematically undermined in the U.S. by persistent barriers to equitable healthcare access for marginalized communities.<sup>3</sup> This has only worsened since the U.S.'s last UPR review in 2020.

5. At the U.S.'s last UPR review in 2020 (3rd Cycle), the U.S. received multiple recommendations about access to sexual and reproductive healthcare and ending racial discrimination in policing and the justice system, echoing recommendations that were made during the 2d Cycle.<sup>4</sup>

- Nine countries recommended the U.S. ensure universal access to sexual and reproductive health services<sup>5</sup> including information and education<sup>6</sup> and family planning;<sup>7</sup>

- Multiple countries recommended that the U.S. take measures to ensure equitable access to health care and guarantee the right to health,<sup>8</sup> paying special attention to women and girls who faces multiple and intersection forms of discrimination<sup>9</sup> and maternity care;<sup>10</sup>
- Six countries urged the U.S. to allow international aid and federal funding to support access to sexual and reproductive health service;<sup>11</sup>
- Repeating a recommendation from the 2015 UPR, Australia recommended the U.S. ensure that laws permitting the refusal of care based on religious and moral beliefs do not restrict women's sexual and reproductive health and rights and that measures are put in place to monitor and prevent violations of these rights;<sup>12</sup> and
- Building on recommendations from the 2015 UPR, twenty-seven countries urged the U.S. to take concrete steps to address systemic racism in policing,<sup>13</sup> reform police surveillance across federal, state, and local levels,<sup>14</sup> and promote racial equity within the criminal justice system.<sup>15</sup>

6. Despite the U.S.'s support of the above recommendations, there has been a significant deterioration since the 3rd Cycle review. In 2022, U.N. experts condemned the regression of already unstable reproductive rights in the U.S. after the Supreme Court overturned federal abortion protections.<sup>16</sup> In 2023 and 2024, the UN Committees overseeing compliance with the Convention on the Elimination of All Forms of Racial Discrimination and the International Covenant on Civil and Political Rights specifically recommended that the U.S.:<sup>17</sup>

- End the criminalization and the imposition of criminal sanctions on people who have abortions, health care providers and those who assist them;
- Consider adopting the WHO Abortion Care Guidelines which explicitly prohibits direct and indirect criminalization;
- Eliminate racial disparities in the criminal justice system by reducing unnecessary criminal justice interaction, including by avoiding over-policing and by advancing alternatives to arrest and incarceration;
- Provide legal, effective, safe access to abortion; and
- Prevent and combat maternal mortality and morbidity and eliminate discrimination and disparities in the field of sexual and reproductive health and rights.

7. In light of information received about the impact of the Dobbs decision, the Human Rights Committee also recommended that the U.S.:

- Remove barriers impeding access to care including inter-state travel restrictions; and

- Ensure that patient confidentiality is observed and protect people seeking abortions from surveillance.

8. Finally, the Committees emphasized that the U.S. should take all measures necessary at the federal, state, local, and territorial levels to implement their recommendations.<sup>18</sup>

## **II. Discussion of the United States' Non-Compliance with Obligations**

### **A. Background**

9. Since the last UPR cycle, the United States has experienced one of the most significant rollbacks of individual rights in modern history. In 2022, the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization* overturned *Roe v. Wade* (1973) overruling the federal constitutional right to abortion and giving individual states the power to regulate abortion. Currently, 29 states have severe restrictions on abortion that would have been unconstitutional prior to the *Dobbs* decision. (See State Innovation Exchange ("SiX"), Center for Reproductive Rights ("CRR") and Ipas, Global Justice Center and Physicians for Human Rights ("Ipas/GJC/PHR") reports for more information on the national landscape and state laws).

10. After the *Dobbs* decision, UN experts denounced the dismantling of nearly 50 years of legal precedent protecting the right to abortion.<sup>19</sup> The experts criticized the serious retrogression, warning that the "shocking and dangerous rollback of human rights will jeopardize women's health and lives."<sup>20</sup> They noted the chilling impact of the "threat of criminalisation" which "discouraged women and girls from engaging with the health system and seeking prenatal care" and led to some clinics to refrain from providing abortion-related services even in states where it remained legal.<sup>21</sup> The experts called on then President Joe Biden to take necessary steps at the federal level to mitigate the consequences of the decision.<sup>22</sup>

11. In November 2024, Donald Trump was re-elected president and took office in January of 2025. As described in detail in other submissions since taking office the Trump Administration has not only rolled back federal initiatives to support abortion access, it has refused to enforce federal laws protecting abortion clinics and guaranteeing that pregnant people facing obstetric emergencies have access to abortion care. (See CRR report for more information about federal actions threatening reproductive rights). The administration has taken steps to dismantle federal agencies tasked with addressing critical health issues, such as the Substance Abuse and Mental Health Services Administration (SAMHSA), which addresses mental health, including perinatal mental health.

12. As highlighted by the recommendations from UN treaty bodies, one particularly troubling aspect of the retrogression is the widespread use of criminal prosecutions and penalties. Currently over 30 states have laws imposing criminal penalties for people who perform abortions.<sup>23</sup> (See SiX, CRR, and Ipas/GJC/PHR reports for information about criminal and other laws impacting health care providers).

13. Perhaps even more troubling are the increasing prosecutions, threats of prosecution and harassment of people who have abortions and those who assist them.

## **B. Criminalization of Pregnant Persons and Those Who Help Them Access Abortion Care**

### **1. Criminalizing Pregnant People for Ending Pregnancies and Experiencing Adverse Pregnancy Outcomes**

14. States have increasingly targeted people for their pregnancy-related decisions or actions, sometimes using laws targeting pregnant people, but more frequently misapplying laws never intended to punish pregnancy outcomes.

#### **a. Criminal Statutes Explicitly Targeting Pregnant People**

15. Currently, only one state has a law explicitly making terminating one's own pregnancy after 24 weeks of pregnancy a crime.<sup>24</sup> The law continues to be used against pregnant people in that state, including a woman who had a miscarriage,<sup>25</sup> despite a general trend toward the repeal of such laws post-*Dobbs* and judicial precedent in other states, where similar restrictions have been struck down.<sup>26</sup>

16. Yet, other states have recently introduced bills that, if passed, could impose homicide penalties on individuals who have abortions.<sup>27</sup> Another proposed bill could subject a pregnant person to a fine of up to \$1,000 or imprisonment for up to five years merely for traveling to another state with the intent to obtain one, even if they do not go through with the procedure.<sup>28</sup>

#### **b. Prosecuting Pregnant People Without Explicit Legal Authorization**

17. Even in states without explicit statutory provisions criminalizing self-managed abortion, people are criminalized through misuse of other statutes. Our statistics reveal that at least 1,400 people have been jailed in just 16.5 years based on their pregnancy or pregnancy outcome, with the highest numbers in states with the strictest abortion restrictions.<sup>29</sup> Prosecutorial overreach disproportionately targets low-income white and Black pregnant individuals, with poverty being the strongest predictor of pregnancy criminalization.<sup>30</sup> In the first year after the *Dobbs* decision, at least 210 pregnant people faced criminal charges related to pregnancy, marking the highest number of documented pregnancy-related prosecutions in a single year.<sup>31</sup> As discussed below, criminalization occurs because prosecutors charge individuals with crimes that were never intended to apply to pregnancy loss or rely on case law redefining the term "child" in a criminal child abuse law to include a fetus in utero to prosecute pregnant people for actions during pregnancy.<sup>32</sup>

##### **i. Prosecutions for "child abuse" of a fetus.**

18. In three states, courts have interpreted child abuse statutes to include fetuses within the definition of "child," enabling the prosecution of pregnant individuals for acts or omissions during pregnancy.<sup>33</sup> Although these states have explicit statutes that protect pregnant people from prosecution for ending a pregnancy, criminal child abuse or endangerment laws are still used to charge them for actions perceived as posing a risk to the fetus.<sup>34</sup> For example, despite

the repeal of laws criminalizing self-induced abortion, Oklahoma still prosecutes under its child neglect statute, as courts classify a viable fetus as a child.<sup>35</sup> Last year, a South Carolina woman was prosecuted for homicide by child abuse after experiencing a pregnancy loss.<sup>36</sup>

19. Similarly, Alabama's law prohibiting "chemical endangerment of a child," initially intended to protect children from drug exposure in locations where methamphetamine is manufactured, has been expanded to prosecute pregnant individuals for substance use, even if they were unaware of their pregnancy. The Alabama Supreme Court ruled in 2013 that the term "child" includes embryos and fetuses, opening the floodgates for prosecutions.<sup>37</sup> Multiple pregnant people have been arrested and jailed for marijuana use before they knew they were pregnant, despite statutory language that says that people must have "knowingly, recklessly, or intentionally" exposed a child to drugs.<sup>38</sup> This expansion of the law is not supported by scientific evidence, as there is no conclusive, consistent, or predictable proof that any criminalized drug, including marijuana, uniquely and significantly harms a fetus in a manner that justifies criminal prosecution.

20. Even in states where the law does not define a fetus as a person, prosecutors still pursue child abuse charges against pregnant individuals. Investigations found that at least 44 women in Mississippi were arrested for alleged crimes, based solely on positive drug tests, without evidence that their newborns suffered harm.<sup>39</sup> Because of racial bias, criminalizing substance use during pregnancy and adverse family policing policies, disproportionately impact Black women.<sup>40</sup> Fear of family separation and criminalization may deter individuals with substance use disorder from seeking pregnancy and substance use care.<sup>41</sup>

## **ii. Abuses of prosecutorial discretion to evade statutory protections.**

21. Prosecutors ignore many statutory protections that prohibit prosecuting pregnant people, driven by overreach and stigma against those who self-manage abortions or use drugs during pregnancy.<sup>42</sup> Prosecutors, wielding broad discretion in charging decisions, often overstep their authority to circumvent legislative protections, searching for ways to charge a pregnant person with a crime.<sup>43</sup> They frequently use the threat of murder or homicide charges to pressure individuals into pleading guilty to lesser offenses.<sup>44</sup> Lacking legal authority to charge someone for a crime for an act or omission toward a pregnancy, they may charge a person with laws never intended to apply to such situations, including "abuse of a corpse" or "concealment of a birth." For instance, in spite of clear statutory prohibitions on charging people who have miscarriages or abortions with a crime, Ohio prosecutors charged a young Black woman who experienced a pregnancy loss with abuse of a corpse, a felony, when she sought emergency care after experiencing a miscarriage at home when she was denied abortion care at a hospital.<sup>45</sup>

22. The legal strategy of granting rights to fetuses is used to prosecute or threaten to prosecute individuals for crimes against their own pregnancies.<sup>46</sup> Originally designed to protect pregnant people from harm caused by others, fetal harm laws in at least 38 states allow homicide charges for pregnancy loss.<sup>47</sup> Some states have created specific crimes like feticide,

while others have amended existing laws to include fetuses as victims, creating risks for overreach by prosecutors.<sup>48</sup>

23. Most fetal homicide laws prohibit criminal charges against pregnant individuals for their own pregnancy, but many states lack explicit protections, allowing prosecutors to stretch the laws to charge individuals for pregnancy loss. Two states have protections against criminalization that have limitations that suggest that pregnant people may be charged with homicide based on a pregnancy outcome under certain circumstances.<sup>49</sup>

## **2. Criminal and Civil Bans on Abortion Support in the United States**

24. In the aftermath of the *Dobbs*<sup>50</sup> decision, some states have enacted laws criminalizing individuals who assist others in obtaining abortions.<sup>51</sup> These laws not only restrict access to abortion but also impose severe penalties on those who help others navigate abortion bans. These laws and recent cases prosecuting family members underscore the heightened legal risks for individuals and organizations providing abortion support, as state authorities target helpers and other forms of abortion support.

### **a. Criminal Laws Explicitly Targeting People Who Help Others Access Abortion**

25. Two states with criminal abortion bans have enacted laws that create criminal liability for individuals who assist young people in accessing abortion care, including by helping them access abortion services in other states where abortion is legal without parental consent.<sup>52</sup> These measures impose severe penalties on those who aid young people in accessing a legal abortion, and reflect broader efforts to restrict abortion access beyond state lines. The laws disproportionately impact young people in extremely vulnerable situations, including survivors of sexual abuse. The laws frame assistance for young people seeking abortion care as a criminal act, using terms like "abortion trafficking" to penalize providing logistical support.<sup>53</sup> "Violators" of these offenses in Idaho could face up to five years of imprisonment and in Tennessee could be charged with a Class A misdemeanor with possible imprisonment for eleven (11) months and twenty-nine (29) days.<sup>54</sup> The recently enacted laws are already being challenged for violating constitutional rights, including freedom of speech and expression and the right to travel.<sup>55</sup>

26. Texas law imposes both civil and criminal liability on those who assist others in obtaining an abortion. Under civil law, private citizens can sue anyone who "aids or abets" an abortion after about six weeks of pregnancy.<sup>56</sup> (See Section C.2 for further discussion of this law). Furthermore, the state criminalizes the distribution and mailing of abortion-inducing medication, even from providers, and requires an in-person examination. These laws extend liability beyond providers, deterring even those offering logistical or informational support.<sup>57</sup>

### **b. Prosecuting People Who Help Others Access Abortion Under Existing Criminal Laws**

27. Even in states without explicit laws criminalizing abortion assistance, individuals have been prosecuted under other criminal statutes. In Nebraska, a young person who self-managed



an abortion and her mother who helped her obtain abortion pills were both criminally charged. The mother pleaded guilty to violating Nebraska's abortion law, furnishing false information to law enforcement and removing or concealing human skeletal remains and faces up to five years in prison.<sup>58</sup>

28. Similarly, a Louisiana grand jury indicted a mother of a pregnant young person and a New York doctor on charges of "criminal abortion," a felony, after the mother allegedly ordered abortion pills online for her daughter.<sup>59</sup> States are increasingly targeting people who facilitate access to abortion medication, even across state borders, expanding criminal liability beyond direct providers to friends and family pregnant people turn to for help.

### **c. Expanding Criminalization and Censorship For Providing Information and Practical Support**

29. Beyond individual prosecutions for people who directly help others have abortions, states are also threatening to prosecute organizations that provide information or practical support for people in need of abortion. States have threatened to prosecute organizations that provide funding and logistical support to travel to states where abortion is legal such as the North Texas Equal Access Fund and the Yellowhammer Fund in Alabama. Concern about legal risk have led some organizations to temporarily cease operations.<sup>60</sup>

30. Anti-abortion activists also push for novel interpretations of existing laws as a basis to criminalize those who provide information about abortion. They have argued that the federal Comstock Act,<sup>61</sup> an anti-obscenity law from 1873, should be interpreted to prohibit the transportation and mailing of abortion-related materials, including not only medications but also information facilitating access to abortion. While the Department of Justice issued a memorandum in 2022, stating that the Act does not prohibit mailing abortion medications unless intended for illegal use, anti-abortion advocates have pushed for a broader interpretation.<sup>62</sup> This has fueled fears that the Department of Justice under the Trump Administration could reinterpret the law to prohibit both the mailing of abortion medications and the dissemination of information related to abortion access.

31. Abortion related information has also been targeted for censorship and suppression. Following the *Dobbs* decision, social media platforms like Facebook, Instagram, and TikTok temporarily banned content related to abortion pills for violating "community standards."<sup>63</sup> Online providers such as Aid Access and Plan C Pills have faced legal threats, including a Texas lawmaker introducing a bill that would allow private citizens to sue internet providers for hosting abortion pill websites, as part of a broader legislative push to target online clinics.<sup>64</sup> These measures not only prevent individuals from accessing abortion care but also stifle discourse on reproductive rights.

### **C. Misuse of Civil Laws to Chill Abortion Access**

32. In addition to the seismic shifts in interpretations of the U.S. Constitution and the misuse of state criminal laws to punish people who support abortion-seekers, the legal confusion and fear around abortion have been exacerbated by abortion opponents' misuse of the civil legal system to harass individuals who aid abortion seekers. Using lawsuits strategically filed in jurisdictions with right-wing conservative judges, abortion opponents seek to chill access to abortion care, cutting abortion seekers off from networks of care. Specifically, they use wrongful death statutes intended to compensate individuals for fetal loss caused by third-party negligence to target providers of abortion care and those who assist pregnant people seeking an abortion. In addition, abortion opponents in some states have passed laws which create monetary incentives (“bounties”) to privately enforce anti-abortion laws.

### **1. Unintended Consequences of Extending Tort Causes of Action to Fetuses**

33. Several states have wrongful death statutes that apply to the loss of a fetus, allowing wrongful death claims to be brought on behalf of a fetus lost as a result of third-party negligence.<sup>65</sup> In fifteen of those states, the statutes apply to prenatal life at any stage of development.<sup>66</sup> The statutes have either been amended to include fetuses under the definition of “person” or otherwise permit a separate cause of action for the death of a fetus.<sup>67</sup> These laws were not meant to grant rights to the fetus itself, but made it possible for grieving parents and family members to recover damages for the loss suffered.<sup>68</sup>

34. While these statutes were intended to recognize the harm caused by fetal death due to negligent conduct and offer legal redress, they have been misused in ways to allow causes of action against abortion providers and those who help pregnant people access abortion care.<sup>69</sup> The laws have been weaponized by former partners of women who have terminated their pregnancies, who initiated claims against the clinic where the abortion was legally performed.<sup>70</sup> Ryan Magers, for example, brought suit on behalf of the fetus under Alabama’s wrongful death statute in 2019 against the clinic where his ex-girlfriend received an abortion, two years after the procedure was performed.<sup>71</sup> A probate judge appointed Magers the representative of the fetus’ estate, giving Magers standing to sue for damages (though his claim was ultimately dismissed for failure to comply with briefing rules).<sup>72</sup>

35. Mario Villegas, after hearing about the Alabama suit, pursued a similar action in Arizona. In 2020, he was granted standing to sue on behalf of the fetus four years after his ex-wife’s abortion was performed.<sup>73</sup> Villegas’ case remains in litigation, nearly five years later.<sup>74</sup> It is set to go to trial based, in part, on the remarkable claim that the disclosure on the consent form signed by Villegas’ ex-wife, who voluntarily terminated the pregnancy, was improper. He is demanding compensation for lifetime wages of an eight-week embryo. This case is indicative of a broader trend away from reliable and fair application of the rule of law to distorted and unforeseen outcomes as a result of right-wing activist judges.

36. In another high-profile case, even friends who help with gaining access to abortion pills were targets of an abusive suit.<sup>75</sup> In 2023, a man named Marcus Silva filed a lawsuit in which he demanded millions of dollars from three women he claims helped his wife access abortion pills

to self-manage an abortion just after the *Dobbs* decision.<sup>76</sup> With the backing of powerful abortion opponents, he filed a wrongful death suit.<sup>77</sup> Notably, he filed the case a few weeks after they had divorced.<sup>78</sup> Unable to legally compel his ex-wife to disclose her private information, Silva recently dropped his lawsuit as it became clear that he merely weaponized the law to harass her and her friends.<sup>79</sup>

37. These instances of abusive litigation actions demonstrate how existing legal frameworks intended to compensate people who experience pregnancy losses are being weaponized against pregnant people. Though none have thus far been successful, they have gained further traction each time, extending the pathway for potential abuse of the law by anti-abortion activists.

## **2. Private Enforcement of Anti-Abortion Initiatives Through Bounty Laws**

38. Currently, twelve states ban abortion from fertilization.<sup>80</sup> Some of those states have created legal mechanisms known as bounty laws that are deliberately structured to empower and encourage ordinary citizens to enforce anti-abortion laws on a private level.<sup>81</sup> Bounty laws give individuals the power to file lawsuits against any person who performs an abortion or aids or abets an abortion in exchange for a reward.<sup>82</sup>

39. The law originally known as Texas' Senate Bill 8 (SB 8) was the first bounty law, paving the way for other states to follow.<sup>83</sup> The law provides that any person who performs an abortion after the detection of embryonic cardiac activity or aids and abets someone to get such an abortion is subject to civil penalties pursuant to an action brought by any private citizen.<sup>84</sup> A person who files a successful claim under SB 8 is entitled to an award of \$10,000 for each abortion performed, induced or aided and abetted by the defendant.<sup>85</sup> Oklahoma passed a similar law, but it was struck down for violating protections under the state's constitution in 2023.<sup>86</sup> Yet states continue to try to pass these types of laws. Missouri introduced a bill, almost identical to SB 8, except that it would have prevented a person who caused the pregnancy through rape, sexual assault, or incest from bringing suit.<sup>87</sup> Finally, Idaho passed a bounty law, which also creates a cause of action against abortion providers but limits the ability to bring suit to certain family members of the fetus, such as the father, grandparents, siblings, or aunts or uncles, who can recover at least \$20,000 in damages.<sup>88</sup>

40. Despite minor variations, bounty laws at their core restrict abortion access by incentivizing private citizens to target abortion providers and people who facilitate access to abortion care, such as abortion funds and practical support networks.<sup>89</sup> Dr. Alan Braid, a physician in Texas, was the first to be sued by three people for performing an abortion six days after Texas' SB 8 went into effect.<sup>90</sup> The court, however, dismissed the case, asserting that a person who has not been directly affected by the abortion care provided does not have standing to sue.<sup>91</sup>

41. Although no other states have bounty laws in effect, those that have passed them have created a ripple effect that could embolden other states with near-total abortion bans to adopt

similar legal tactics. Further, while not many cases have been brought under these bounty laws, they foster fear and intimidation, deterring individuals from providing abortion services and helping people who are in need of abortion care.

#### **IV. Recommendations**

42. We urge that the following recommendations be made to the United States:

1. Immediately repeal all federal, state and local laws criminalizing abortion and enact legislation to guarantee access to abortion care in line with the World Health Organization's Abortion Care Guideline (2022). Further, end policies or practices that result in punishment of individuals based on pregnancy outcomes or acts during one's pregnancy through the criminal legal system, family regulation system, immigration system, or civil legal system.
2. Immediately repeal bans on abortion support and prohibit the use of criminal law or private civil causes of action to penalize or harass people who provide abortion care or support abortion seekers by sharing information, providing funding, assisting with interstate travel, or furnishing the means to self-manage an abortion.
3. Strengthen state and federal protections for privacy of patients' medical information, and repeal all laws that require healthcare personnel to report individuals to law enforcement or family regulation authorities on the basis of acts during pregnancy. The State should ensure that the privacy of healthcare information is protected even when it is held by private corporations, and that it is not used as evidence in criminal, family regulation, immigration, or other civil proceedings. Healthcare settings must remain confidential and safe for people seeking care to foster trust in the healthcare system.
4. Expand coverage for existing healthcare programs to ensure that all individuals, particularly those from marginalized communities including those of African descent, Indigenous Peoples and people with disabilities have access to intersectional and culturally respectful, affordable and comprehensive healthcare, including mental health care, voluntary drug treatment, and sexual and reproductive health services. This includes ensuring access to contraception, sexual education, and respectful maternal healthcare, as well as integrating community-based midwifery into healthcare systems.
5. Implement comprehensive and targeted policies and programs to eliminate racial, ethnic, and socioeconomic disparities in access to sexual and reproductive health services. This includes enacting policies and programs aimed at removing barriers to accessing services, reducing maternal mortality and morbidity, particularly for marginalized communities, including racial and ethnic minorities, Indigenous peoples, and low-income individuals.

## ANNEX 1: Contact Information and Description of Organizations

Human Rights and Gender Justice Clinic, CUNY School of Law  
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The **Human Rights and Gender Justice Clinic (HRGJ)** at CUNY Law School clinic advocates before international and regional human rights bodies and national and local courts and legal institutions to combat gender discrimination and sexual violence, advance reproductive and sexual rights and economic and social rights, and promote women's participation and empowerment.

**If/When/How: Lawyering for Reproductive Justice** is a legal services and advocacy nonprofit that uses the tools of lawyering, including direct legal services, research, and advocacy, to ensure that everyone can make decisions about their pregnancies and their families free from discrimination, punishment, or coercion.

**Pregnancy Justice** is a legal nonprofit organization dedicated to advancing and defending the rights of pregnant and postpartum individuals—and all people capable of pregnancy—whether they give birth, experience pregnancy loss, or have an abortion. The organization carries out its mission through criminal and strategic legal defense, research, and policy advocacy.

Founded in 2008, **Abortion Care Network (ACN)** is the national association for independent community-based, abortion care providers and their allies. Independent abortion providers care for the majority of people seeking abortion in the U.S. – often serving individuals and families with the fewest resources and in the most rural parts of the country. Abortion Care Network is building a sustainable future for abortion access by resourcing, connecting, and celebrating independent abortion clinics and their allies.

**Indigenous Women Rising** is committed to honoring Native & Indigenous People’s inherent right to equitable and culturally safe health options through accessible health education, resources and advocacy.

The **Society of OB/GYN Hospitalists (SOGH)** is a rapidly growing group of physicians, midwives, nurses, and other individuals in the healthcare field who support the OB/GYN Hospitalist model. SOGH is dedicated to improving outcomes for hospitalized women and supporting those who share this mission.

**Transcending Strategies LL** is a consulting firm dedicated to advancing Indigenous Midwifery, maternal health, and Native American birth center development. Founded on principles of equity, cultural preservation, and systemic change, the company provides strategic guidance, technical assistance, and advocacy support to organizations, policymakers, and communities working to improve Native American reproductive healthcare. Through a blend of policy expertise, community-centered approaches, and innovative program development, Transcending Strategies LLC empowers Native American midwives and birth workers to create sustainable, culturally grounded solutions in maternal and infant health.

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<sup>i</sup> Postal mail % HRGJ, City University of New York School of Law, 2 Court Square, Long Island City, NY, USA.

<sup>ii</sup> Additional information about organizations and contacts are included in Annex I.

<sup>3</sup> Philip Alston (Special Rapporteur), Report of the Special Rapporteur on Extreme Poverty and Human Rights on His Mission to the United States of America, U.N. Doc. A/HRC/38/33/Add.1 (May 4, 2018), ¶¶ 56, 57; Report of the Working Group on the Issue of Discrimination Against Women in Law and in Practice on its Mission to the United States of America, U.N. Doc. A/HRC/32/44/Add.2 (August 4, 2016), ¶¶ 19, 28-30, 65-72, 74, 90(i-l), 95(a-i), 96(a); Concluding Observations on the Combined Seventh to Ninth Periodic Reports of the United States of

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America, U.N. Doc. CCPR/C/USA/CO/4 (September 25, 2014), ¶ 18; Juan E. Méndez (Special Rapporteur), Report of the Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, U.N. Doc. A/HRC/22/53 (February 1, 2013), ¶ 37; Rashida Manjoo (Special Rapporteur), Report of the Special Rapporteur on Violence Against Women, Its Causes and Consequences, U.N. Doc. A/HRC/17/26/Add.5 (June 6, 2011), ¶ 21; Concluding observations of the Committee on the Elimination of Racial Discrimination, U.N. Doc. CERD/C/USA/CO/6 (May 8, 2008), ¶ 33.

<sup>4</sup> UPR (2d Cycle 2015) (sexual and reproductive health care [176.100, 176.164] discrimination and profiling in justice system [176.121, 176.130, 176.131, 176.137, 176.140, 176.141, 176.143, 176.144, 176.145, 176.146, 176.148, 176.149, 176.150, 176.151, 176.152, 176.153, 176.159, 176.160, 176.161, 176.220]).

<sup>5</sup> UPR (3d Cycle 2020) (United Kingdom of Great Britain and Northern Ireland, 26.300; Austria, 26.302; Canada, 26.303; France, 26.306; Luxembourg, 26.308; Mexico, 26.310; all supported).

<sup>6</sup> UPR (3d Cycle 2020) (Iceland, 26.307; Malaysia, 26.309; all supported).

<sup>7</sup> UPR (3d Cycle 2020) (Denmark, 26.304; supported).

<sup>8</sup> UPR (3d Cycle 2020) (Poland, 26.288; Portugal, 26.289; Angola, 26.290; Azerbaijan, 26.291; Iraq, 26.293; Turkey, 26.295; Venezuela, 26.296; Cuba, 26.298; Norway, 26.299; all supported).

<sup>9</sup> UPR (3d Cycle 2020) (Finland, 26.305; supported).

<sup>10</sup> UPR (3d Cycle 2020) (Sri Lanka, 26.316; supported).

<sup>11</sup> UPR (3d Cycle 2020) (Austria, 26.302; Canada, 26.303; Denmark, 26.304; Netherlands, 26.311; New Zealand, 26.312; Norway, 26.299; all supported).

<sup>12</sup> UPR (3d Cycle 2020) (Australia, 26.301; supported); UPR (2d Cycle 2015) (Sweden, 176.164; supported).

<sup>13</sup> UPR (3d Cycle 2020) (Togo, 26.220; Argentina, 26.224; Australia, 26.225; Austria, 26.227; Azerbaijan, 26.228; Costa Rica, 26.231; Côte d'Ivoire, 26.232; Palestine, 26.238; Japan, 26.250; Kazakhstan, 26.251; Malta, 26.255; Romania, 26.256; Turkey, 26.260; all supported).

<sup>14</sup> UPR (3d Cycle 2020) (Russia, 26.113; Mexico, 26.133; Algeria, 26.134; Malaysia, 26.135; Angola, 26.223; Costa Rica, 26.231; Ecuador, 26.234; Sri Lanka, 26.235; Georgia, 26.247; Qatar, 26.249; Namibia, 26.264; all supported).

<sup>15</sup> UPR 2020 (Egypt, 26.132; Austria, 26.226; Timor-Leste, 26.259; South Sudan, 26.262; all supported).

<sup>16</sup> Michelle Bachelet (UN High Commissioner), Bachelet on US ruling on Dobbs v Jackson Women's Health Organization, United Nations Human Rights Office of the High Commissioner, <https://www.ohchr.org/en/statements/2022/06/bachelet-us-ruling-dobbs-v-jackson-womens-health-organization> (June 24, 2022); Working Group on Discrimination Against Women and Girls: Melissa Upreti (Chair), Dorothy Estrada Tanck (Vice-Chair), Elizabeth Broderick, Ivana Radačić, and Meskerem Geset Techane; Tlaleng Mofokeng, Special Rapporteur on the Right of Everyone to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health; and Reem Alsalem, Special Rapporteur on violence against women, its causes and consequences, Joint Web Statement by UN Human Rights Experts on Supreme Court Decision to Strike Down *Roe v. Wade*, United Nations Human Rights Office of the High Commissioner, <https://www.ohchr.org/en/statements/2022/06/joint-web-statement-un-human-rights-experts-supreme-court-decision-strike-down> (June 24, 2022) [hereinafter *Joint Web Statement by UN Human Rights Experts o Supreme Court Decision to Strike Down Roe v. Wade* (June 24, 2022)]

<sup>17</sup> Concluding Observations on the Fifth Periodic Report of the United States of America, U.N. Doc. CCPR/C/USA/CO/5 December 7, 2023), ¶¶ 15, 27; Concluding Observations on the Combined Tenth to Twelfth Reports of the United States of America, U.N. Doc. CERD/C/USA/CO/10-12 (21 September 2022), ¶¶ 26-28, 36.

<sup>18</sup> Concluding Observations on the Fifth Periodic Report of the United States of America, U.N. Doc. CCPR/C/USA/CO/5 December 7, 2023), ¶ 29; Concluding Observations on the Combined Tenth to Twelfth Reports of the United States of America, U.N. Doc. CERD/C/USA/CO/10-12 (21 September 2022), ¶ 36.

<sup>19</sup> Reem Alsalem, Special Rapporteur on violence against women, its causes and consequences; Working Group on Discrimination Against Women and Girls: Dorothy Estrada Tanck (Chair), Ivana Radačić (Vice-Chair), Elizabeth Broderick, Meskerem Geset Techane and Melissa Upreti; Nazila Ghanea, Special Rapporteur on freedom of religion or belief; Alice Jill Edwards, Special Rapporteur on Torture and Other Cruel, Inhuman Degrading Treatment or Punishment; Felipe González Morales, Special Rapporteur on the human rights of migrants; Olivier De Schutter, Special Rapporteur on extreme poverty and human rights; Ana Brian Nougères, Special Rapporteur on the right to privacy; Gerard Quinn, Special Rapporteur on the rights of persons with disabilities; Ashwini K.P., Special

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Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance, United States: Abortion bans put millions of women and girls at risk, UN experts say (June 2, 2023), <https://www.ohchr.org/en/press-releases/2023/06/united-states-abortion-bans-put-millions-women-and-girls-risk-un-experts-say> [hereinafter *United States: Abortion bans put millions of women and girls at risk, UN experts say* (June 2, 2023)]; *Joint Web Statement by UN Human Rights Experts on Supreme Court Decision to Strike Down Roe v. Wade* (June 24, 2022).

<sup>20</sup> *Joint Web Statement by UN Human Rights Experts on Supreme Court Decision to Strike Down Roe v. Wade* (June 24, 2022).

<sup>21</sup> *United States: Abortion bans put millions of women and girls at risk, UN experts say* (June 2, 2023)

<sup>22</sup> *Joint Web Statement by UN Human Rights Experts on Supreme Court Decision to Strike Down Roe v. Wade* (June 24, 2022).

<sup>23</sup> Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes, 4, Sept. 12, 2023, [https://www.law.cuny.edu/wp-content/uploads/media-assets/2023\\_Clinic\\_HRJG\\_REPORT-U.S.-Criminalization-of-Abortion-and-Pregnancy-Outcomes.pdf](https://www.law.cuny.edu/wp-content/uploads/media-assets/2023_Clinic_HRJG_REPORT-U.S.-Criminalization-of-Abortion-and-Pregnancy-Outcomes.pdf) [hereinafter *Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes*].

<sup>24</sup> Nev. Rev. Stat. § 200.220.

<sup>25</sup> Caroline Kitchener, *She Said She Had a Miscarriage – Then She Got Arrested Under an Abortion Law*, Washington Post, Oct. 24, 2024, <https://wapo.st/4hvG42P>.

<sup>26</sup> *Compare McCormack v. Hiedeman*, 694 F.3d 1004, 1015 (9th Cir. 2012) (the Ninth Circuit invalidated a similar law in Idaho in 2012) with *Frazier v. State*, 456 P.3d 1084 (Nev. Ct. App. 2020)) (the Nevada state court declined to overturn the law, *Frazier v. State*, 456 P.3d 1084 (Nev. Ct. App. 2020)); *See also* OK S.B. 1555, Ch. 133, O.S.L. 2022 (repealing Okla. Stat. Ann. tit. 21 §§ 862-3). There remains a prohibition against self-managed abortion on the books, but it has no penalties attached. Okla. Stat. Ann. tit. 63, § 1-733. The Attorney General has said the law does not permit the charging of a pregnant woman with a misdemeanor or felony for performing or inducing an abortion on herself to intentionally terminate her pregnancy. Op. Atty. Gen. No. 2023-12, November 21, 2023; *see also*, 2021 Ariz. Sess. Laws Ch. 286, § 3 (repealed AZ Rev Stat § 13-3604 (2020), a law criminalizing people who self-manage their abortions); 2023 SC S.B. 474 (NS) (South Carolina bill that amended S.C. Code Ann. § 44-41-80 to prohibit criminal prosecution of any woman who seeks or obtains an abortion).

<sup>27</sup> *See, e.g.*, South Carolina's Prenatal Equal Protection Act (H. 2537, 126th Session, 2025-2026) seeks to redefine "person" to include an unborn child at any stage of development, extending legal protections from fertilization onward. This change could subject individuals to homicide or assault charges for any perceived harm to a fetus, raising concerns about the criminalization of miscarriages; *see also*, Oklahoma's Abolition of Abortion Act (SB. 456 1st Session, 60th Legislature 2025) proposes repealing protections for pregnant individuals from the state's homicide laws, thereby allowing criminal prosecution for individuals who end their pregnancies.

<sup>28</sup> *See* Montana's Establish criminal offence abortion trafficking (HB 609, 69th Legislature 2025) (proposed bill amendment that establishes the criminal offense of "abortion trafficking" in Montana, prohibiting individuals from knowingly transporting within or outside the state for the purpose of obtaining an abortion that is illegal in Montana).

<sup>29</sup> Pregnancy Justice, *The Rise of Pregnancy Criminalization: A Pregnancy Justice Report*, 2-4, Sept. 19, 2023, <https://www.pregnancyjusticeus.org/wp-content/uploads/2023/09/9-2023-Criminalization-report.pdf> [hereinafter *Pregnancy Justice, The Rise of Pregnancy Criminalization*]; Huss et al., *Self Care, Criminalized: The Criminalization of Self Managed Abortion from 2000 to 2020*, Oct. 30, 2023, <https://www.ifwhenhow.org/wp-content/uploads/2023/10/Self-Care-Criminalized-2023-Report.pdf> [hereinafter *Huss et al., Self Care, Criminalized*].

<sup>30</sup> *Pregnancy Justice, The Rise of Pregnancy Criminalization*, at 2.

<sup>31</sup> Pregnancy Justice, *Pregnancy as a Crime: A Preliminary Report on the First Year After Dobbs*, 2, Sept. 24, 2024, <https://www.pregnancyjusticeus.org/resources/pregnancy-as-a-crime-a-preliminary-report-on-the-first-year-after-dobbs/>, [hereinafter *Pregnancy Justices, Pregnancy as a Crime: A Preliminary Report on the First Year After Dobbs*].

<sup>32</sup> *Id.* at 7.

<sup>33</sup> Pregnancy Justice, *Unpacking Fetal Personhood*, September 2024, 12 <https://www.pregnancyjusticeus.org/wp-content/uploads/2024/09/Fetal-personhood.pdf>, [hereinafter *Pregnancy Justice, Unpacking Fetal Personhood*].



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<sup>34</sup> *Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes*, at 3.

<sup>35</sup> *See, e.g., State v. Green*, 2020 OK CR 18, 474 P.3d 886 (State charged a woman with criminal child neglect; the Oklahoma court of criminal appeals held that a viable unborn fetus constituted a child under 18 within the protection of the criminal child neglect statute.).

<sup>36</sup> Lauren Sausser, *She Was Accused of Murder After Losing Her Pregnancy. SC Woman Now Tells Her Story*, KFF Health News, Sept. 23, 2024, <https://kffhealthnews.org/news/article/pregnancy-loss-criminalization-homicide-south-carolina-college-student/>

<sup>37</sup> *See, e.g., Ex parte Ankrom*, 152 So. 3d 397 (Ala. 2013) (Alabama court's ruling that the word "child" includes embryos & fetuses from the moment of conception).

<sup>38</sup> AL Code § 26-15-3.2 (2023) (making it a felony for a person to knowingly, recklessly, or intentionally expose a child to, allow ingestion or inhalation of, or permit contact with a controlled substance, chemical substance, or drug paraphernalia); *See, e.g.,* Three women were arrested and jailed for marijuana use during pregnancy before even knowing that they were pregnant, highlighting how the law's requirement of "knowing" exposure was overlooked. Amy Yurkanin, Marshall Project, *How One Alabama County Declared War on Pregnant Women Who Use Drugs*, July 26, 2023, <https://www.themarshallproject.org/2023/07/26/alabama-pregnant-women-drugs>.

<sup>39</sup> Anna Wolfe, *Mississippi Today, They Were Prosecuted for Using Drugs While Pregnant. But It May Not Have Been a Crime*. Nov. 16, 2023, <https://www.themarshallproject.org/2023/11/16/mississippi-pregnant-women-drugs-child-abuse>.

<sup>40</sup> Denae L. Bradley, Camille T Kramer, Carolyn B. Sufrin, Karen A. Scott, Crystal M. Hayes, "Because I was a Criminal and Drug Addict" J Racial Ethn Health Disparities. 2024 Jun 11:10.1007/s40615-024-02042-9. doi: 10.1007/s40615-024-02042-9, <https://pubmed.ncbi.nlm.nih.gov/38862844/>

<sup>41</sup> *Id.*

<sup>42</sup> *Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes*, at 5.

<sup>43</sup> *Huss et al., Self Care, Criminalized*, at 50.

<sup>44</sup> *Id.*

<sup>45</sup> Jericka Duncan, *Ohio Woman Charged With Felony After Miscarriage at Home Describes Shock of Her Arrest*, CBS News, Oct. 21, 2024, <https://cbsn.ws/4hyV3cm>.

<sup>46</sup> *Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes*, at 5.

<sup>47</sup> Pregnancy Justice, *Who Do Fetal Homicide Laws Protect?*, 1, June 16, 2023, <https://www.pregnancyjusticeus.org/wp-content/uploads/2022/12/fetal-homicide-brief-with-appendixUPDATED.pdf>

<sup>48</sup> *Human Rights & Gender Justice Clinic, CUNY School of Law, Criminalization and Punishment for Abortion, Stillbirth, Miscarriage, and Adverse Pregnancy Outcomes*, at 5.

<sup>49</sup> *See, e.g.,* Oklahoma excludes pregnant people from its fetal homicide law "unless the mother has committed a crime that caused the death of the unborn child." Okla. Stat. Ann. tit. 21, § 691; Utah provides an exception to its fetal homicide law if an abortion is either "caused by a criminally negligent act or reckless act of the woman" or "not caused by an intentional or knowing act of the woman." Utah Code Ann. § 76-5-201(3)(c); Missouri provides a limited exception in its fetal harm laws, specifying that the law should not be interpreted as creating grounds to prosecute a pregnant person for indirectly harming their unborn child due to failure to properly care for themselves or follow a specific prenatal care program. Mo. Ann. Stat. § 1.205.

<sup>50</sup> *Dobbs v. Jackson Women's Health Org.*, 142 S. Ct. 2228 (2022).

<sup>51</sup> Idaho Code Ann. §18-623; Tenn. Code Ann, § 39-15-201.

<sup>52</sup> *Id.*

<sup>53</sup> *Id.*

<sup>54</sup> Idaho Code Ann. §18-623(5); Tenn. Code Ann, § 39-15-201(b).

<sup>55</sup> Idaho's law went into effect, but has been partially enjoined *Matsumoto v. Labrador*, 2023 WL 7388852 (D. Idaho 2023).

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- <sup>56</sup> Tex. Health & Safety Code § 171.208(a)(2).
- <sup>57</sup> Tex. Health & Safety Code § 171.063.
- <sup>58</sup> Jacey Fortin, Nebraska Woman Sentenced to Jail for Giving Daughter Abortion Pills, N.Y. Times (Sept. 22, 2023), <https://www.nytimes.com/2023/09/22/us/jessica-burgess-abortion-pill-nebraska.html>.
- <sup>59</sup> Pam Belluck, Louisiana Seeks Extradition of New York Doctor Over Abortion Pills, N.Y. Times (Jan. 31, 2025), <https://www.nytimes.com/2025/01/31/health/abortion-louisiana-new-york-prosecution-shield-law.html>.
- <sup>60</sup> A federal court recently held that the Attorney General's threats of prosecution in Alabama were unconstitutional. However, litigation is expected to continue to the appellate courts. *Yellowhammer v. Attorney General of Alabama*, Lawyering Project, <https://lawyeringproject.org/our-work/yellowhammer-v-attorney-general-of-alabama/>; Lauren McGaughy, Why Texas Abortion Funds Are on Pause After the End of Roe v. Wade, Dallas Morning News (Aug. 8, 2022), <https://www.dallasnews.com/news/politics/2022/08/08/why-texas-abortion-funds-are-on-pause-after-the-end-of-ro-v-wade/>.
- <sup>61</sup> 18 U.S.C. § 1461.
- <sup>62</sup> U.S. Dep't of Just., Office of Legal Counsel, Application of the Comstock Act to the Mailing of Prescription Drugs That Can Be Used for Abortions (Dec. 23, 2022), <https://www.justice.gov/olc/opinion/application-comstock-act-mailing-prescription-drugs-can-be-used-abortions>.
- <sup>63</sup> Madison Malone Kircher, Facebook and Instagram Are Censoring Posts About Abortion, The Cut (July 21, 2022), <https://www.thecut.com/2022/07/facebook-instagram-censoring-abortion-posts.html>.
- <sup>64</sup> Caroline Kitchener, Anti Abortion Groups Target Distribution of Abortion Pills in New Legal Strategy, Wash. Post (Nov. 20, 2024), <https://www.washingtonpost.com/politics/2024/11/20/antiabortion-crack-down-pills/>.
- <sup>65</sup> Greer Donley & Jill W. Lens, Abortion, Pregnancy Loss, & Subjective Fetal Personhood, 75 Vanderbilt Law Review (2022), <https://scholarship.law.vanderbilt.edu/vlr/vol75/iss6/1/>.
- <sup>66</sup> Paul Benjamin Linton, Esq., In Vitro Fertilization, State Wrongful Death Statutes and State Fetal Homicide Statutes: The Reaction to LePage v. Center for Reproductive Medicine, Issues in Law & Medicine, Volume 29 (2024), <https://pubmed.ncbi.nlm.nih.gov/38771714/>.
- <sup>67</sup> *Pregnancy Justice, Unpacking Fetal Personhood*, at 29.
- <sup>68</sup> *Pregnancy Justice, Unpacking Fetal Personhood*, at 29-30.
- <sup>69</sup> Katherine Fleming, Wrongful Death: A Loaded Gun of Fetal Personhood and Intimate Intimidation, Harvard Law Review (2024), [https://journals.law.harvard.edu/jlg/wp-content/uploads/sites/88/2024/07/Student-Note\\_Wrongful-Death\\_A-Loaded-Good-of-Fetal-Personhood-and-Intimate-Intimidation.pdf](https://journals.law.harvard.edu/jlg/wp-content/uploads/sites/88/2024/07/Student-Note_Wrongful-Death_A-Loaded-Good-of-Fetal-Personhood-and-Intimate-Intimidation.pdf).
- <sup>70</sup> *Id.*
- <sup>71</sup> *Id.* at 238.
- <sup>72</sup> Nicole Santa Cruz, Her Ex-Husband is Suing a Clinic Over the Abortion She Had Four Years Ago, ProPublica (2022), <https://www.propublica.org/article/arizona-abortion-father-lawsuit-wrongful-death>.
- <sup>73</sup> *Id.*
- <sup>74</sup> *Estate of Baby Villegas v. Jackrabbit Family Medicine*, The Lawyering Project, <https://lawyeringproject.org/our-work/estate-of-baby-villegas-v-jackrabbit-family-medicine/>.
- <sup>75</sup> Sarah McCammon, Texas Man Sues Ex-Wife's Friends for Allegedly Helping Her Get Abortion Pills, NPR (2023), <https://www.npr.org/2023/03/11/1162805773/texas-man-sues-abortion-pills> (last visited Feb. 27, 2025).
- <sup>76</sup> *Id.*
- <sup>77</sup> *Id.*
- <sup>78</sup> Nadia Lathan, Texas Man Drops Lawsuit Against Women He Accused of Helping His Wife Get Abortion Pills, AP (2024), <https://apnews.com/article/texas-abortion-bans-settlement-4be6bdee1520292d675f678f7053a6ce>.
- <sup>79</sup> *Id.*
- <sup>80</sup> *State Laws and Policies: State Bans on Abortion Throughout Pregnancy*, Guttmacher Institute, 5 March 2025, <https://www.guttmacher.org/state-policy/explore/state-policies-abortion-bans>
- <sup>81</sup> Becca Damante & Kierra B. Jones, A Year After the Supreme Court Overturned *Roe v. Wade*, Trends in State Abortion Laws Have Emerged, Center for American Progress (2023), <https://www.americanprogress.org/article/a-year-after-the-supreme-court-overturned-ro-v-wade-trends-in-state-abortion-laws-have-emerged/>.

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<sup>82</sup> *Id.*

<sup>83</sup> *Id.*

<sup>84</sup> Tex. Health & Safety Code § 171.208(a)(1) and (2).

<sup>85</sup> Tex. Health & Safety Code § 171.208(b)(2).

<sup>86</sup> Oklahoma Call for Reproductive Justice v. Oklahoma, 531 P.3d 117, 2023 OK 60 (2023).

<sup>87</sup> MO SB 453 (102 General Assembly 2023).

<sup>88</sup> ID Stat. § 18-8807.

<sup>89</sup> Emma Bowman, As States Ban Abortion, the Texas Bounty Law Offers a Way to Survive Legal Challenges, NPR (2022), <https://www.npr.org/2022/07/11/1107741175/texas-abortion-bounty-law> (last visited Feb. 27, 2025).

<sup>90</sup> Becky Sullivan, What Happens Next in Abortion Providers' Fight to Challenge the Texas Law, NPR (2021), <https://www.npr.org/2021/12/10/1063029754/supreme-court-texas-abortion-next-steps> (last visited Feb. 27, 2025).

<sup>91</sup> Annie Gimbel, Texas Court Dismisses Case Against Dr. Alan Braid for Violating Abortion Ban, CBS News (2022), <https://www.cbsnews.com/texas/news/texas-court-dismisses-case-against-dr-alan-braid-violating-abortion-ban/> (last visited Feb. 28, 2025).