The Racist History of Abortion Restrictions

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In the months since the *Dobbs* decision and the resultant overturn of *Roe v*. Wade, various states in our nation have experienced a deluge of abortion restrictions and bans, even including recent threats to curb national access to medication abortion. Although abortion remains a contentious topic in the media and politics, the general public has consistently shown support toward maintaining abortion access. As these restrictions intensify against the will of the people, the communities most negatively impacted are Black, indigenous, and people of color. While we continue having conversations about health equity and disparities in abortion access, it is imperative to understand that abortion restrictions in the United States are historically rooted in white supremacy.

During the pre-Civil War era, the United States initially had no laws restricting abortion. However, in 1808, there were large economic shifts with the prohibition of importation of enslaved people into the United States – the cost of the enslaved increased, and plantation owners saw a larger economic benefit to their reproduction. Plantation owners often forced sexual relationships or raped enslaved people as a form of forced breeding. Amongst the enslaved, pregnancy prevention and termination became forms of resistance, as they used medicinal plants, like cotton roots, to induce abortions. While formal laws did not exist, plantation owners caught on to these methods and forbade possession of these early abortifacients. Although some states like Connecticut did begin to introduce official abortion restrictions by the early 1800s, there remained relatively few and only after "quickening" (feeling fetal movements).

During the years leading up to the Civil War and the Reconstruction period, fertility rates for native born white people began to decline, while those for immigrant-born white and nonwhite people were increasing. The eugenics movement began to gain traction, encouraging society toward promoting the propagation of those of "superior lineage." The early anti-abortion movement began in pursuit of maintaining the white birth rate, and thereby white supremacy. Around this time, in 1847, the American Medical Associated (AMA) was formed, dominated by white male physicians. The AMA sought to criminalize abortion, arguing that it was not true medicine, as it was largely practiced by Black and indigenous midwives. By 1880, all states had restricted abortion, and by 1910 abortion was illegal in every state.

In the early 20th century, abortion had become an underground service, sometimes with very poor outcomes. According to the Guttmacher Institute, in 1930, 18% of recorded maternal deaths were due to unsafe abortion. By the mid-20th century, hospitals saw a large uptick in septic abortion patients, and were seeing racial disparities in deaths related to unsafe abortions, with Black, indigenous and people of color experiencing worse outcomes. Finally, in the 1960s, the medical community began moving toward abortion reform, and in 1968, the American College of Obstetricians and Gynecologists (ACOG) formally endorsed abortion for medical grounds.

In 1973, the landmark Supreme Court case *Roe v. Wade* created nationwide protections for abortion access via the right to privacy. Since then, many states steadily passed laws to restrict access to abortion until the *Dobbs* decision, which made way once again for outright abortion bans. These bans, once again, most impact nonwhite people and people of lower socioeconomic status. As physicians, we must

recognize that it is impossible to support abortion restrictions in the United States without contributing to structural racism and white supremacy. Abortion restrictions were borne out of these violent structures, and will only continue to perpetuate them.

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