

Global Scientific and Academic Research Journal of Multidisciplinary Studies ISSN: 2583-4088 (Online) Frequency: Monthly Published By GSAR Publishers Journal Homepage Link- https://gsarpublishers.com/journals-gsarjebm-home/



ABORTION POLICY IN THE UNITED STATES & OTHER AREAS: CAUSE-EFFECT ANALYSIS

BY

Eshetu Dana Liberty University PPOG 500



Article History

Received: 09/02/2023 Accepted: 20/02/2023 Published: 24/02/2023

<u>Vol – 2 Issue – 2</u> *PP: - 12-17* The Purpose of this research study is to examine issues related to abortion policy that changes from time to time, various in difference places and differs in different religious affiliations and cultural values. The research study explores consequences, concerns, and problems directly and indirectly connected to abortion as its policy has impact on the individuals as well as group's life related to the reproductive health, perpetuation of generation, cultural integrity, and democracy, and social development. In other words, this research focuses on the causes and effects of abortion policy and abortion itself not only in the women but also in the entire community. Therefore, the research outcome is expected to fill up the gap between exiting abortion policy and the previous one in the United States based on the scope of the research. Finally, cause-effect analysis of this research examines the political, sociocultural, and economic impacts on the abortion policy and practice.

Keywords: Abortion, Policy, Reproductive health, Medical Tourism, Democracy, Judicial interpretation, Reproductive health

Research Methodology

Mixed research methodology that integrates qualitative and quantitative analyses is implemented to explore causes and effects related to the rhetoric of abortion policy in the United States and other parts of the world so that the qualitative facts and quantitative data are applied to find out problems and recommend alternative solutions. Therefore, tables and charts are included in the research to indicate abortion policy, women's reproductive health correlated to politics, and men's role in the abortion policy setting, amendment, and implementation.

Abstract

Research Limitations

This research is conducted to fulfill the graduate study in international relations, as a course work in Liberty University, in the United States, just after the overturning decision of the supreme court that reversed the abortion law that had been effective for about fifty years, Wade vs Roe which was substituted by the decision made on the case of Dobbs v. Jackson Women's Health Organization. Therefore, the time gradient and barrier to study the abortion history, its consequences, women's intention related to internal feeling: pleasure or pain; men's perception to make law in the mendominated situation became a challenging process due to shortage of time. Lack of fund, except the financial aid, also contributed to enhance the limitation of the research procedure. However, the research holds strong analytical information in terms of healthcare (reproductive health, especially maternity -prenatal, antenatal, and postnatal processes); and the impact of political pressure on the women's reproductive health. In fact, the central point of the research considers the truth that show the relation between men and women: women are either mothers, sisters and wives of the men.

Introduction

Abortion policy is a policy that set to govern issues related to abortion, women's reproductive health, perpetuation of generation, family law, family planning, religious concerns as well as cultural integrity, and others. As other public policies, Abortion policy also originates from the law in the way it avoids violating constitutional law; however, States law related to the reproductive health plays a significant role in the effectiveness and efficiency of implementation of the policy. In other words, the local, state, and federal laws have similar objectives in terms of solving public problems (Milakovich & Gordon,2013, pp. 1-10). In fact, abortion policy in the United States changes timely; however, the policy between 1973 to 2022 followed the landmark supreme court decision on the case of Roe v. Wade, 410 U.S. 113(1973) that legalized abortion in the country.

Historically, abortion was illegal in different states before 1973 that caused several reproductive health issues; however,

the supreme court reversed the legality of abortion in 2022 on the case of Dobbs v. Jackson Women's Health Organization. It is a law that needs legal procedure if it requires reaffirmation, reform, or amendment. Nationally, some female politicians publicly opposed the supreme court decision that overruled Roe v. Wade, which had been used as the political, social, cultural, and economic agenda in the United States. For example, the speaker of the house of representative, Nancy Pelosi, called it in public "a big slap on the women's face." Oppositely, religious leaders and others appreciated the reversal of Roe v. Wade. Internationally, the abortion policy of United States impacts the reproductive health policy of other nations because the United States plays a significant role in the international system in terms of setting health care policy related to democracy, organizing facilities that provide training, distributing production that includes medication(s) and others. For example, Mhango (2020) reports the impact of abortion policy change in the U.S on the policy of Malawi(pp.5-15). In addition, the United States involves in rendering services related to reproductive health to the international community via several non-governmental (NGOs) as well as intergovernmental organizations (IGOs). Scientifically, several reproductive health and maternity professionals explain that the main cause for abortion is unwanted pregnancy; and it is more than fifty percent. The effect may result in safe abortion if treated appropriately; death, if neglected; or other problems, if complication develops; the negative effects and outcomes increase when abortion is illegalized and needs unnecessary bureaucratic procedures during conception(the beginning of pregnancy) to due date of delivery (Lowdermilk et al., 2019, pp. 265-283). Therefore, this research examines issues focusing on the cause-effect analysis on the abortion policy of the United States that affect both national and international reproductive health. The research also explores factors that affect abortion policy in the United States related to the judicial interpretation, patrician influence, and others that affect reproductive health. Finally, the research answers question if the abortion policy is the issues of women or both women and men.

Definition and Factors that Affect Abortion Policy

The definition of abortion varies from place to place and persons due to factors that determine definition, such as sociocultural impacts, religious doctrines, and judicial interpretation. According to the dictionary definition that majority members of the society understand, it is defined as the intentional or deliberate termination of a human pregnancy, mostly performed during the time before the fetus is viable (can only survive in the womb). This definition connects abortion with euthanasia (the practice of ending life of patients to limit suffering related to terminal ill). The definition, sometimes, interpreted in different ways so that the legality of abortion and euthanasia become politicized due to implicit and explicit factors that affect the decision-making process to practice both abortion and euthanasia (Blome, et al,2020; Merriam-Webster, n. d, Abortion). In addition, Center for Disease Prevention and Control (CDC) defines a legal induced abortion "as an intervention performed a licensed clinician and other healthcare professionals". When it comes to the abortion policy, it differs from place to place due to various factors that affect the policy. For example, politics and law related to the judiciary interpretation, religious doctrine, cultural history, health-related to women's welfare, and others are the major factors that affect abortion policy, the judicial interpretation, changed the policy that had been effective since 1973, the decision on the case of Roe v. Wade,410 U.S. 113(1973), the supreme court decision.

The source of argument on the abortion policy is not only decision-makers used the Fourteenth Amendment at various times but also the judicial interpretation of personal liberty and restrictions upon state action. It divided people under two groups: one group who believe that the Fourteenth Amendment has relation to abortion; and the opposing groups that abortion is not mentioned in the constitution or the Fourteenth Amendment. In fact, among nine judges of the supreme court, seven judges voted in favor of legalizing abortion; but two judges voted against it in 1973. Comparatively, four judges voted in favor of legalizing abortion; and five others opposed it during 2022 decision on the case of Dobbs v. Jackson Women's Health organization. It infers that the number of supreme court judges who voted in favor and against the abortion law, Roe v Wade. indicates the complexity of abortion policy, its harsh causes, and negative effects. It also shows the influence of time and other political conditions. Whatever the case is, the questions, concerns, and opinions of women should get adequate consideration whenever the abortion policy is set, formed, reformed, and revised. Generally, abortion policy affects both women and the entire society in which the women share social, economic, and cultural values. For example, a family member or significant others are affected directly if a pregnant woman dies from abortion, miscarriage, or other reproductive health issues.

Abortion Policy, Scientific Evidence, and Gender Issues

Scientific evidence and data of abortion rate in terms of different demographic values, such as age, racial status, and others indicate its huge problems that needs attention of the public administration, policymakers, government officials, and other shareholders of the reproductive health organizations. However, the Center for Disease Prevention and Control report indicates that abortion rate and number decrease with increased gestation period above twenty weeks, however, it is high, 93.1 percent, at the early age of gestation, below thirteen weeks. The policy needs to address issues that compel women to practice abortion at the early month of pregnancy; and the reversal of the supreme court case of Roe vs Wade should consider all the medical issues related to the reproductive health because it may increase medical tourism outside the country (Gosh & Mandal, 2019, intro.). The data of abortion in the year of 2011-2020 based on women's age and

racial status is represented in the table below. As indicated in table 1, abortion affects everyone regardless of the demographic variations, such as age, economic status, ethnicity, creed, and others.

Table 1

Abortion Report Based on Ethnicity

1		2	
Racial Status/ Ethnicity	Age	Abortion /1000	Number of States
Caucasian/White	15-44	6.6	48
Non-Hispanic Black	15-44	24.4	48
Hispanic	15-44	11.7	48
Woman of other racial groups	15-44	13	48
Non-Reported			CA, MD & NH

Source: *Center for Disease Prevention and Control (CDC)* (2020).

Sociocultural, legal, and Religious Perspectives

In fact, religious affiliations and their institutional doctrines have huge influence on the issues related to abortion because not only the three major religious affiliations, Christianity, Islamic religion, and Judaism, but also others do not support legalizing abortion. As sociocultural values and religious doctrines contribute to the law and public policy-making process, it is important to consider the perspectives of sociocultural values and interests of the religious as well as other groups formed based on creeds, ethnicity, and various interests. In fact, the majority opinion on the reports of reversing the federal standards on the abortion access, policy, and law indicate that legalizing abortion is not the historical and cultural values of the United States. For example, the Supreme Court justice who wrote the majority opinion excludes abortion among the rights that mentioned as "deeply rooted in the nation's history" It indicates that cultural practice and historical background have significant impact on the policy-making process on the issues related to abortion for several reasons. For instance, some noncelibate women who prefer to avoid pregnancy oppose illegalizing pregnancy but advocate legalizing abortion to let women practice it at any time of the gestation period or the trimester (levin,2020, pp. 20-24). In fact, evidence as well as common sense tells us that pregnancy changes women's physical appearance if it is not managed in an appropriate manner from the beginning of embryo (fertilized eggs that are implanted in the uterus) to delivery or giving birth to an infant (not a child). It physically and physiologically affects women. Opinion-wise, it is heard that some people argue that an embryo or a fetus below twenty weeks' gestation in the womb is just a clog of blood which is a union of half-cell from both parents' gametes (sexual cell) that became a single cell and under development;

and it completely depends on the mother(Lowdermilk, et al., 2019).

However, opposers of abortion contend that an embryo is a life that started its process. They label abortion as a murder which is more than euthanasia because, in euthanasia, there is suffering pain and consent from the patient or a representative. Furthermore, people who support the legality of abortion advocate the removal of an embryo below twenty weeks' gestation because it is not viable (can survive outside the womb). Therefore, supporters want to give the decisionmaking power related to abortion solely to the pregnant woman, but the opposing group connect it with moral values that originates from the religious doctrine and label abortion as a merciless, eternal, or unforgivable sin, evil and immoral action (Sommer & Forman-Rabinovici, 2019, English Standard Bible, 2001/2017, Exodus 20:13; & Zeldovich, et al.,2020, intro.). Such arguments have been continued and left the abortion policymaking process more complex, tough, and challenging which is full of disagreement. How many percent of the U.S. adults support or oppose legalizing abortion? The question depends on the age of fetus or a gestation period or trimester, and reports indicate that more than 60 percent of the U.S adults are in favor of legalizing abortion because it becomes more problematic if abortion is illegalized. Another concern related to legalizing or illegalizing abortion is excluding women during decisionmaking process in the concern that affects women more than. However, women are, either mothers, sisters, or wives of men so that the cause-and-effect related abortion are huge public issues that need effective public policy. How should the abortion policy be effective? The best answer would be following scientific methods and evidence-based information during setting abortion policy and keeping it open for further research.

Scientific Approach towards Abortion

According to maternity science, the pregnancy process takes three trimesters and medical professionals categorize each section of the trimester in three months (CDC,2020). In the United States, legality of abortion became effective almost for the last fifty years until the abortion policy changed in 2022 when the supreme court overturned the landmark court decision of Rao v. Wade, 1973. Before the policy changed, abortion stayed legal so that different types of abortion had been practiced with the implementation of two major kings of abortion processes: pills usage and in-clinic. Historically, abortion was illegal in various states in 1960s until the supreme court decision of 1973 on the case or Roe v. Wade (Wade is not a real name). In the time abortion was illegal in different states, miscarriage, and abortion rate was high because there was no real choice to take care of abortion in safe, scientific, and appropriate manners (Kimpart, 2022; & CDC,2020). In fact, the term abortion and miscarriage are, oftentimes, used interchangeably; however, abortion differs from miscarriage because miscarriage may occur naturally, accidentally, and unintentionally. Oppositely, abortion occurs due to nonaccidental, artificial, and intentional action. Generally, as a similarity between both abortion and

miscarriage, they result in the ending life of fetus. Therefore, the abortion policy related to managing terminating pregnancy changes from time to time; and the debate has been stayed as the political agenda as it divided people in different categories: supporters, neutral, and opposers of the legality of abortion (Blome et al, 2020, pp. 1-20).

Based on various factors, the definition of abortion and miscarriage varies, and the science-based names, such as legal, illegal, complete, incomplete, intentional, accidental, natural, artificial, early medical, and others are used (Lowdermilk, et al., 2019, pp. 258-270). However, all, except the natural and accidental form of abortion that end pregnancy needs fair, transparent, democratic, and effective policy. It also needs evidence-based information that comes from research outcomes. For example, Center for Disease Prevention and Control (CDC) defines the early medical abortion as "administration of medication(s) to induce an abortion at less or equal to nine completed weeks' gestation (2020). Scientifically, if the mother decided to practice abortion, for psychological, economical, physiological, and others, it affects the development of fetus and may result in defects. Therefore, recommendations from relevant scientific research should be incorporated in the public policy that governs abortion to minimize the hazardous effects, such as maternal death, complication related to abortion, and others (CDC,2020).

However, it may elicit questions, such as "Is the policy that overturned the rule of Rao v. Wade is fair and democratic; is it happened because women practice abortion without responsibility after the age of viability (above twenty weeks' gestation)?" Different people answer the question in various ways. However, the statistical date of reported abortion in 2020 indicate that only 0.9 percent of abortion after twentyone weeks' gestation is reported; and 93.1 percent is done with in below thirteen weeks' gestation (CDC,2020). It indicates the responsibility of women to keep pregnancy after viability. Regardless of the fact related to the statistical data, supporters who favor for the legality of abortion in the United States disagree with the current abortion policy; however, individuals and groups who oppose legalizing abortion in the United States are pleased with the current abortion policy. It also divided the supreme court judges to make decision with a majority vote with one a single vote difference. When it comes to the freedom to make decision on abortion, some scholars argue that legalizing abortion is like owning an insurance that empower women to make decision anytime when necessary. It also increases the pregnancy rate but decreases unwanted childbirth (Levin, 2020, pp. 1-20).

In state wise, abortion was illegal in 1960s and the problem led to make Roe v. Wade that seven out of nine judges voted in favor to make a supreme majority because abortion policy needs to be a federal law so that will develop the feasibility of the policy implementation, and it became challenging issues for states to control citizens who change places from time to time (Vilda, al.,2021) Center for Disease Prevention and Control report on the reported abortion indicates that the number rate and ratio of abortion decreased by fifteen, eighteen, and nine percent from 2011-2019(2020). Abortion and its policy affect all nations, internationally, and each nation has policy that governs reproductive health.

International Prospective

Several developed, underdeveloped, and developing nations legalized abortion before and after the supreme court landmark decision of the United States, Roe v. Wade, 410 U.S. 113(1973). However, some nations who follow the sharia law historically banned abortion. The following table shows some developed nations who legalized abortion because it has direct and indirect correlation with democracy, affirmative action, gender equality, and other democratic rights. In fact, due to the existence of politics and administrative dichotomy and dilemma, the political values, such as democracy and representation are, sometimes, confused with administrative rights , such as rationality and representation(Milakovich & Gordon, 2017, p.49). Let's look at the abortion policy in some other nations because legalizing abortion has been treated as democracy for more than four decades in various nations.

Abortion Laws III various Developed Nations			
Nations	Abortion legalized Year	Remarks	
Denmark	1973	Similar year of Roe v. Wade	
Austria	1974	A Year after Roe v. Wade	
France	1975	Later	
Italy	1978	Later	
Sweden	1975	Later	
Netherla nds	1984	A decade later Roe v. Wade	
Canada	1969	Before Roe v. Wade	

 Table 2

 Abortion Laws in Various Developed Nations

Source: Public Broadcasting Service: https:// www.pbs.org-How the U.S. compares with the rest of the world on abortion rights; Center for reproductive rights (https://reproductiverights.org: The world's Abortion laws.

It is possible to investigate the dates and time when the abovedeveloped nations made public policy decision that legalize abortion. It is also expected if one or more nations reverse the decision due to a bandwagon effect or other reasons that time will give an appropriate response.

Conclusion

Abortion policy is one of the most powerful public policies that needs careful attention because it has direct and indirect correlation to human life, perpetuation of generation, maternal health, family safety, and others. As it is mentioned in the majority opinion writer of the supreme court decision that reversed the case of Roe v. Wade, 410 U.S. 113(1973), it is important to reinvestigate if issues related to abortion are deeply rooted in the Nation's history and tradition and implicit in the concept of ordered liberty; however, it is mandatory to obey the law. Generally, the evidence-based information related to the scientific research outcomes indicate that causes of abortion vary with personal health situations, age, religious affiliation, economic status, and others so that legalizing abortion during the first and second trimester minimizes negative effects better than posing bans and restrictions on the abortion policy. Finally, it is recommended to listen to adult women who have experience in reproductive health, healthcare professionals and others to set appropriate, effective, and efficient policy because such shareholders contribute relevant information during establishing the public policy. The U.S. abortion policy need to consider minimizing medical tour that women may travel for medical options to the nations who have policies that legalize abortion (Cohen, 2014).

Recommendations

A commonsense that tells as that women are either sisters, wives, or mothers of men; or, conversely, men are either brothers, husbands, or fathers of women. Therefore, it is obvious that the natural link between men and women allow mutual understanding of the two demographic value holders. In fact, only females become pregnant and feel what comes with pregnancy during the gestation period because pain is what the person feels. Thus, the role of women needs to be high, strong as well as dominant in the decision-making process on abortion or other issues related to women's reproductive health. In other words, men should listen to women instead of being judgmental based on theoretical knowledge, scientific generalization, perception, and political power if women are sane, matured enough(mentally, physically, and economically), and reasonable to practice abortion in the way it never violates legal as well as moral values. Generally, legalizing abortion increases safety and security of women (sisters, mothers, and wives of men) because it is a complement of moral values when there is transparent, honest, and open discussion between women and men. Finally, it is recommendable to minimize the cause of intentional abortion, unwanted pregnancy, which may result in miscarriage, directly or indirectly, due to factors, such as psychological destress(mental), lack of nutritional imbalances, and other basic needs that include shelter. clothes ...etc

References

- 1. Blome, A., Lloren, A., & Rosset, J. (2020). The politicization of abortion, voters' stereotypes, and the electoral success of women candidates. *Parliamentary Affairs*, 73(1), 211-232. <u>https://doi.org/10.1093/pa/gsy044</u>
- Center for Disease Control and Prevention (CDC) (2020). Abortion Surveillance System FAQs. https ://www.cdc.gov/reproductivehealth/data_stats/aborti on.htm
- Center for Reproductive Rights(n.d.). The world's abortion laws. <u>https://reproductiverights.org</u>

- Cohen, I.G(2014). Patients with Passports: Medical tourism, law, and ethics. Oxford University Press; 1st ed.
- Forman-Rabinovici, A., & Sommer, U. (2018). Reproductive health policymakers: Comparing the influences of international and domestic institutions on abortion policy. *Public Administration* (*London*), 96(1), 185-199. https://doi.org/10.1111/padm.12383
- Ghosh, T., & Mandal, S. (2019). Medical tourism experience: Conceptualization, scale development, and validation. *Journal of Travel Research*, 58(8), 1288-

1301. https://doi.org/10.1177/0047287518813469

- Holy Bible-English Standard version(n.d.). Holy-Bible. Online. <u>https://holy-bible.online/asv.php(</u> Original work published 2008).
- Kimport, K. (2022). No real choice: How culture and politics matter for reproductive autonomy. Rutgers University Press. <u>https://doi.org/10.36019/978197881795</u>1
- Levine, P. B. (2020). Sex and consequences: Abortion, public policy, and the economics of fertility. Princeton University Press. https://doi.org/10.1515/9780691221649
- Lodermilk, L., Cashion, M., Perry, S. & Alden, K(2019). Maternity and women's health care; Mosby. Print.
- 11. Merriam-Webster (n.d). Abortion; Euthanasia. In Merriam-Webster.com <u>https://www.merriam-</u> webter.com/disctionary / abortion/ euthanasia.
- Mhango, C. (2022). Reversal of Roe VS wade implications on women's health in Malawi. *Malawi Medical Journal*, 34(2), 157-158. https://doi.org/10.4314/mmj.v34i2.14
- Milkovich, E., & Gordon, J. (2017). *Public administration in America* (11th ed.). Belmont, CA: Wadsworth Publishing.
- Sommer, U., & Forman-Rabinovici, A. (2019). Producing reproductive rights: Determining abortion policy worldwide. Cambridge University Press. <u>https://doi.org/10.1017/9781108694407</u>
- 15. The U.S. Constitution.https://constitutioncenter.org/interactiv e-constitution/full-text:U.S Const. amend. XVI; & V.
- Vilda, D., Wallace, E., Daniel, C., Evans, G., Stoecker, C., & Theall, P. (2021). State abortion policies and maternal death in the United States, 2015–2018. American Journal of Public Health (1971), 111(9), 1696-1704. https://doi.org/10.2105/AJPH.2021.306396
- Zeldovich, V. B., Rocca, C. H., Langton, C., Landy, U., Ly, E. S., & Freedman, L. R. (2020). Abortion policies in U.S. teaching hospitals: Formal and informal parameters beyond the law. *Obstetrics and Gynecology (New York, 1953), 135*(6), 1296-

1305. <u>https://doi.org/10.1097/AOG.000000000003</u> <u>876</u>