

IUSSP statement on restricting access to abortion

The International Union for the Scientific Study of Population (IUSSP) expresses its deep concern about the decision of the Supreme Court of the United States to revoke the right to abortion. As a Union of population scientists, the IUSSP draws attention to the large body of global evidence supporting the need for wide access to sexual and reproductive services, including contraception and abortion across the world.

Access to comprehensive sexual and reproductive services is essential for people to achieve their sexual and reproductive rights. An extensive body of research shows that restricting access to the full range of reproductive services, including contraception and abortion, will adversely impact the health and well-being of people and their families. What is more, these impacts are highly inequitable, disproportionately affecting those who are socially and economically marginalized or disadvantaged. Global evidence also shows that restricting access to legal abortion is highly associated with increases in unsafe abortion ([https://doi.org/10.1016/S0140-6736\(17\)31794-4](https://doi.org/10.1016/S0140-6736(17)31794-4)) and therefore in pregnancy-related morbidity and mortality. Moreover, legal restrictions and criminalizing abortion do not prevent people from obtaining abortions ([https://doi.org/10.1016/S2214-109X\(20\)30315-6](https://doi.org/10.1016/S2214-109X(20)30315-6)).

In addition to the immediate and serious consequences that restricting access to legal abortion would have within the United States, such a decision is likely to have repercussions in other countries as well, potentially emboldening anti-abortion activists and slowing down the current positive global trend towards increases in legal access to abortion.

The IUSSP endorses the [PAA statement](#), and reiterates its unequivocal commitment to the rights of all people to sexual and reproductive information and services, and to make sexual and reproductive choices without discrimination or coercion.

Bearak J et al., Unintended pregnancy and abortion by income, region, and the legal status of abortion: estimates from a comprehensive need for 1990-2019, *Lancet Global Health*, 2020, 8(9):E1152–E1161 ([https://doi.org/10.1016/S2214-109X\(20\)30315-6](https://doi.org/10.1016/S2214-109X(20)30315-6)).

Ganatra B et al., Global, regional, and subregional classification of abortions by safety, 2010–14: estimates from a Bayesian hierarchical model, *Lancet*, 2017, 390(10110):2372–2381, ([https://doi.org/10.1016/S0140-6736\(17\)31794-4](https://doi.org/10.1016/S0140-6736(17)31794-4)).

Rachel K. Jones et al., Long-Term Decline in US Abortions Reverses, Showing Rising Need for Abortion as Supreme Court Is Poised to Overturn *Roe v. Wade*, *Guttmacher Institute*, June 2022 (<https://www.guttmacher.org/article/2022/06/long-term-decline-us-abortions-reverses-showing-rising-need-abortion-supreme-court>)