Report of the APA Councils¹ on the Effects of Dobbs v. Jackson Women's Health Organization on Mental Health and the Physician-Patient Relationship



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While the American Psychiatric Association (APA) has existing resources pertaining to women's health, abortion, and privacy in the physician-patient relationship,² recent court decisions, including Dobbs v. Jackson Women's Health Organization, which overturned Roe v. Wade, have polarized state responses to pregnant individuals' health care and decision-making. Whereas some states have moved to restrict or deny a pregnant individual's decision to terminate a pregnancy that had been protected by Roe, other states have sought to protect or strengthen a pregnant individual's right to make healthcare decisions, including the decision to terminate a pregnancy. In addition, litigation and legislative proposals in some states have gone beyond proscription of abortion procedures, attempting to restrict or ban access to medication abortions and to certain forms of contraception. The Supreme Court's decision in *Dobbs*, by overturning *Roe*, has jeopardized the physical and mental health of millions of American women and has undermined 1) the privacy and sanctity of the physician-patient relationship, and 2) the ability of the medical community to provide evidence-based women's health care without fear of legal and ethical retribution. The pervasive and troubling consequences of the Dobbs decision should be taken into consideration in the APA's advocacy efforts:

- relationship: Legislation restricting or denying a patient's prerogative, as was protected by *Roe v. Wade*, to terminate an unwanted pregnancy or one that must be terminated for medical reasons intrudes on the privacy and autonomy of the patient and the privacy of the physician-patient relationship. These laws blatantly contravene the clinician's responsibility to protect patient confidentiality and autonomy, undermining the trust that lies at the foundation of the physician-patient relationship and the ethical obligation of physicians to discuss the full spectrum of medical options to the patient. Choices about medical care need to be made by a patient in consultation with their physician and without government interference.
- Government interference with evidence-based medical care:
 The new generation of anti-abortion laws prevents physicians from providing evidence-based care in accord with the patient's wishes. These laws obligate physicians to ignore the best interests and well-being of the patient, and this represents an unethical and inappropriate departure from the fundamental ethical traditions and obligations of being a physician.

- Adverse effects on the physical and mental health of pregnant individuals: In many cases, restrictive abortion laws: In many cases, restrictive abortion laws can result in harmful medical outcomes. There are significant misconceptions in the public sphere that abortion has adverse mental health consequences. In fact, the scientific literature demonstrates that denial of abortion care is associated with worse mental health outcomes.
- Adverse effects on the family unit: Studies have shown that
 existing children in families where the mother was forced to
 carry an unwanted pregnancy to term have worse outcomes
 than in families where the mother could access patientcentered, necessary and appropriate treatment. These include
 lower mean child development scores, particularly in
 expressive language and self-help, disrupted maternal
 bonding, and economic insecurity among existing children of
 individuals denied an abortion.
- Disproportionate impact on underserved populations:
 Communities that have been marginalized, including people who have experienced racial discrimination, live in rural areas, have low income, or experience a mental illness, will be disproportionately impacted by state legislation restricting or denying the right to terminate a pregnancy.
- Threats of criminal prosecution of physicians providing evidence-based medical interventions for pregnancy care:
 Physicians who undertake medically appropriate procedures in often life-threatening conditions, such as ectopic pregnancies or spontaneous abortion, may be at risk of criminal prosecution for performing an abortion. This threat can have a chilling effect on life-saving medical decisionmaking and has already led to denial of needed medical care for the complications of pregnancy.

² APA Position Statements:

- "Position Statement on Abortion, Family Planning, Legislative Intrusion, and Reproductive Decisions" Authors APA Dobbs Work Group and Committee on Women's Mental Health, Approved by Board of Trustees December 2023
- "Position Statement on Abortion and Women's Reproductive Health Care Rights" Authors Council on Minority Mental Health and Health Disparities and Committee on Women's Mental Health, Approved by Board of Trustees December 2023