Women’s Health Protection Act
The Left’s Quest for Abortion on Demand

The so-called Women’s Health Protection Act (WHPA) aims to codify and expand Roe v. Wade, invalidating almost every state restriction on abortion across the country. First introduced in 2013, this extreme legislation is clear evidence of the Left’s unyielding crusade for elective abortion on demand and without limitation.

1973 Roe v. Wade and Beyond

In a 7-2 decision, the U.S. Supreme Court struck down a Texas law banning abortion based on a women’s privacy interest, legalizing the procedure nationwide by judicial fiat. The Court also recognized a states’ interest in the health of the mother and “potential” life. Taking on a legislative role that went beyond its judiciary powers, the Court divided pregnancy into three trimesters to establish regulations on the right to an abortion.

Although the Court has since abandoned the trimester framework, embarking on speculative, unscientific assessments of pre and post viability (which they have deemed around 24 weeks for now), and “undue burdens” on women, the Court has declined to overturn Roe.

Women’s Health Protection Act of 2021

House Sponsor: Rep. Judy Chu (D-California), H.R. 3755
Senate Sponsor: Sen. Richard Blumenthal (D-Connecticut), S. 1975

WHPA would supersede and apply to all federal law, notwithstanding any other provision, including the Religious Freedom Restoration Act of 1993. The bill would also trump any conflicting state law.

- Creates a statutory right to provide or obtain an abortion without any limitation or requirement that “singles out the provision of abortion services” and “impedes access” to abortion services based on one or more factors, including:
  - Whether the limitation or requirement “is reasonably likely to delay some patients in accessing abortion services” and
  - Whether the limitation or requirement “interferes” with an abortionist’s ability to “provide care and render services” in accordance with the abortionist’s “good-faith medical judgment.”
- Would make certain pro-life policies unlawful unless the government “establish[es], by clear and convincing evidence,” that the policy “significantly advances” in the least restrictive way either the “safety of abortion services” or the “health of patients.”
• Treats abortion like one more “medical procedure” and refers to the concept of procedures that are “medically comparable” to abortion.
• Jeopardizes ultrasound and fetal heartbeat tests, mandatory reflection periods, and parental notice requirements.
• Blocks states’ discretion to enact pain-capable laws at 20-weeks of pregnancy, as this is prior to “fetal viability.”
• State governments that lose a legal fight to uphold pro-life laws must pay litigation costs and “reasonable attorney fees” to the pro-abortion plaintiffs.
  - If the pro-abortion plaintiffs lose, they are protected from paying such costs and fees unless their case is deemed frivolous.
• Medical professionals who conscientiously oppose abortion risk losing their jobs, and faith-based facilities risk losing public funding.

Additional takeaways:

WHPA is premised on the notion that “abortion services are essential health care and access to those services is central to people’s ability to participate equally in the economic and social life of the United States.”

Abortion is not health care. Health care does not kill human life.

Among the 15 pages of “findings” to justify the extreme policy, the legislation touts radical gender ideology, suggesting that women are not the only ones capable of becoming pregnant.

WHPA also invokes the concept of reproductive justice, which aims to address restrictions that “perpetuate systems of oppression, lack of bodily autonomy, white supremacy, and anti-Black racism.”

Margaret Sanger, founder of abortion giant Planned Parenthood and known eugenicist, advocated for the extermination of the African American population and the “gradual suppression, elimination and eventual extinction, of defective stocks — those human weeds which threaten the blooming of the finest flowers of American civilization.”¹

Abortion facilities are largely prevalent in minority communities, and black women are disproportionally the leading abortion consumer.²

CWALAC will continue our efforts to ensure that federal legislation truly protects women’s health and well-being while recognizing the sanctity of all human life.