A diverse and impressive set of stakeholders have filed 45 amicus briefs urging the Supreme Court to once again affirm longstanding precedent and uphold a woman’s constitutional right to access safe and legal abortion services. This term, the United States Supreme Court will review provisions of a sweeping Texas law that imposes numerous restrictions on access to abortion. This case challenges two provisions in that law: (1) the requirement that doctors who provide abortion services must obtain admitting privileges at local hospitals no farther than 30 miles away from the clinic; and (2) the requirement that abortion facilities must meet building specifications to essentially become mini-hospitals (also known as ambulatory surgical centers, or ASCs).

The law, commonly referred to as “HB 2”, was designed to shut down abortion clinics and has already forced more than half of Texas’ clinics to close their doors. If the challenged provisions are upheld, it will leave 10 or fewer abortion clinics open in Texas, the second-most populous state in the nation, and will gravely harm women in Texas.

A broad array of organizations and individuals – including leading medical experts, social scientists, legal experts, federal/state and local governmental entities and officeholders, Republican voices, military officers, religious leaders, ethicists, reproductive rights and other civil rights advocates, and many others – have filed briefs in support of Whole Woman’s Health and other Texas providers – the Petitioners in the case – in what will be the most consequential reproductive rights case in the last two decades. The following chart summarizes these 45 amicus briefs.

For more information, please contact Natalie Munoz at nmunoz@skdknick.com.

**THEME: Medical experts oppose these restrictions (5 briefs)**
- American College of Obstetricians and Gynecologists, American Medical Association, American Academy of Family Physicians, American Osteopathic Association, and American Academy of Pediatrics (Wilmer Cutler Pickering Hale and Dorr LLP)
- National Physicians Alliance, American Academy of Nursing, Center for American Progress D/B/A Doctors for America, American Nurses Association, and Society for Adolescent Health and Medicine (Skadden, Arps, Slate, Meagher & Flom LLP)
- Public Health Deans, Department Chairs, and Faculty and the American Public Health Association (Debevoise & Plimpton)
- Society of Hospital Medicine and Society of OB/GYN Hospitalists (Crowell & Moring LLP)
- Medical Staff Professionals (Duane Morris LLP)

**THEME: Scientific studies show that abortion is safe and that these restrictions will harm women (1 brief):**
- Social Science Researchers (O’Melveny & Myers LLP)

**THEME: Millions of Texas women will be adversely impacted by these restrictions (11 briefs)**
- National Abortion Federation and Abortion Providers (Fried, Frank, Harris, Shriver & Jacobson LLP)
- Planned Parenthood Federation of America, Planned Parenthood of Greater Texas Surgical Health Services, Planned Parenthood Center for Choice, and Planned Parenthood South Texas Surgical Center (Planned Parenthood Federation of America)
- National Latina Institute for Reproductive Health, et al. (Cynthia Soohoo, City University of New York School of Law, International Women’s Human Rights Clinic, Main Street Legal Services; National Latina Institute for Reproductive Health; Freshfields Bruckhaus Deringer US LLP)
- In Our Own Voice: Twelve Organizations Dedicated to the Fight for Reproductive Justice (Willkie, Farr & Gallagher, LLP)
- Service Women's Action Network and Retired or Former Military Officers (Shearman & Sterling LLP)
The Texas Association Against Sexual Assault, The Black Women's Health Initiative, The National Sexual Violence Resource Center, Melisa Holmes, M.D., and Professor Margaret Drew (Arnold & Porter LLP)

Experts and Organizations Supporting Survivors of Intimate Partner Violence (Legal Voice and Stoel Rives LLP)

National Network of Abortion Funds (Arent Fox LLP)

Jane's Due Process, Inc. (Law Office of Susan Hays, PC)

Institute for Women's Policy Research, National Association of Social Workers, Texas Chapter of National Association of Social Workers, and Re:Gender (Jenner & Block LLP)


**THEME: Legal experts explain the errors in the Fifth Circuit’s decision in this case and urge reversal (6 briefs)**

- Information Society Project at Yale Law School (Priscilla J. Smith, Yale Law School)
- Law Professors Melissa Murray, I. Glenn Cohen, and B. Jessie Hill (Durie Tangri LLP)
- Constitutional Accountability Center (Constitutional Accountability Center)
- Lambda Legal Defense and Education Fund, Inc. (Lambda Legal Defense and Education Fund, Inc.)
- The New York City Bar Association (The New York City Bar Association)

**THEME: Experts explain how credible, competent evidence – not pseudoscience – must support the state’s health rationale and fails to do so here (3 briefs).**

- American Civil Liberties Union, The ACLU of Alabama, and the ACLU of Wisconsin (American Civil Liberties Union Foundation; ACLU Foundation of Alabama, Inc.; and ACLU of Wisconsin Foundation, Inc.)
- Scientists, Science Educators, Skeptics, The Center for Inquiry, and The Richard Dawkins Foundation for Research and Science (Edward Tabash and Center for Inquiry)

**THEME: Women and physicians share their stories about obtaining or providing abortion (5 briefs)**

- Janice Mac Avoy, Janie Schulman, and Over 110 Other Women in the Legal Profession Who Have Exercised Their Constitutional Right to an Abortion (Paul, Weiss, Rifkind, Wharton & Garrison LLP)
- The Honorable Wendy Davis, Teresa Fedor, Lucy Flores, and Judy Nicastro (Dechert LLP)
Kate Banfield, Jo Baxter, Amy Brenneman, Elizabeth Driehaus, Anne Fowler, Carol McCleary, Suzanne Poppema, Sheila Schroeder, Leni Silverstein, and Jennifer Steffen (Kramer Levin Naftalis & Frankel LLP)

Advocates for Youth (Christopher J. Wright, Elizabeth Austin Bonner & Elizabeth B. Uzelac and Advocates for Youth)

Physicians for Reproductive Health (Orrick, Herrington & Sutcliffe LLP)

THEME: The Texas restrictions will have negative economic implications (2 briefs)

- National Women's Law Center and 47 Additional Organizations Committed to Equality and Economic Opportunity for Women (National Women’s Law Center and Simpson Thacher & Bartlett LLP)
- Business Leaders (Dentons US LLP)

THEME: Government agencies and officials oppose these restrictions (4 briefs)

- The United States of America (U.S. Department of Justice)
- 163 Members of Congress (Stroock & Stroock & Lavan LLP)
- The City of New York, The City of Baltimore, The City of Boston, The City of Dayton, The City of Madison, The City and County of San Francisco, and Travis County, Texas Officials (Corporation Counsel of the City of New York)

THEME: Republican officials speak out against Texas’ intrusion into women’s liberty (1 brief)

- Republican Majority for Choice and Its National Chairs, Former Republican Members of Congress, and Current and Former Republican State Officeholders (Morvillo Abramowitz Grand Iason & Anello P.C.)

THEME: Religious leaders oppose these restrictions (2 briefs)

- Theologians and Ethicists (Fish & Richardson P.C.)

THEME: Economists and Historians Argue for Careful Court Scrutiny of the Texas Restriction (2 briefs):

- Health Economists (Keker & Van Nest LLP)
- Historians (Pillsbury Winthrop Shaw Pittman LLP)
THEME: Texas restrictions will harm the healthcare marketplace (3 briefs):

- Freedom and Individual Rights in Medicine (FIRM), Dr. Amesh Adalja, Dr. Paul Hsieh, Dr. Karen Salimieri, and Jacob Sullum (Milbank, Tweed, Hadley & McCloy LLP)
- Ten Pennsylvania Abortion Care Providers (Women’s Law Project; David S. Cohen, Professor of Law, Thomas R. Kline School of Law, Drexel University; Pepper Hamilton LLP)
- Experts in Health Policy (Ropes & Gray LLP; National Partnership for Women & Families)
**THEME: Medical experts oppose these restrictions (5 briefs)**

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<th>Amici</th>
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<td><strong>American College of Obstetricians and Gynecologists, American Medical Association, American Academy of Family Physicians, American Osteopathic Association, and American Academy of Pediatrics</strong>&lt;br&gt;Press Contact: Kate Connors</td>
<td><em>Amici curiae</em> are the Nation’s leading medical societies, whose policies represent the considered judgments of the many physicians in this country. <em>Amici</em> filed a brief in order to inform the Court that the challenged provisions of HB 2 are not supported by accepted medical practice or scientific evidence. Abortion is an extremely safe procedure and outpatient clinics and physicians’ offices are safe places to obtain abortions. Requiring facilities where abortions are performed to conform to the standards for ambulatory surgical centers, or requiring abortion providers to maintain admitting privileges at a local hospital, is unnecessary and does nothing to improve the health or safety of women who obtain abortions. Indeed, the implementation of these requirements is jeopardizing women’s health by impeding, if not outright preventing, access to safe, legal, evidence-based abortion care. Click here to view full brief: <a href="#">American College of Obstetricians and Gynecologists, American Medical Association, American Academy of Family Physicians, American Osteopathic Association, and American Academy of Pediatrics</a></td>
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<td><strong>National Physicians Alliance, American Academy of Nursing, Center for American Progress d/b/a Doctors for America, American Nurses Association, and Society for Adolescent Health and Medicine</strong>&lt;br&gt;Press Contact: Lauren Malet</td>
<td>Brief of <em>amici</em> the National Physicians Alliance, American Academy of Nursing, Center for American Progress d/b/a Doctors for America, American Nurses Association, and Society for Adolescent Health and Medicine argues that the challenged provisions of HB 2 do not appear to advance patient health and safety. <em>Amici</em> argue any health and safety rationale for the statute appears to be pretextual because: (1) no competent evidence before the state legislature or the district court demonstrated that the statute’s provisions would promote health and safety; (2) Texas has not imposed similar restrictions on much riskier outpatient procedures; and (3) the public statements of key Texas officials indicate that many of the law’s supporters were motivated by a desire to close abortion clinics, to make abortions more difficult to obtain, and to evade the Supreme Court’s rulings in <em>Roe</em> and <em>Casey</em>. <em>Amici</em> also observe a broader, baleful trend of state legislatures using health and safety as a pretext to regulate healthcare for unrelated ideological reasons. Because <em>amici</em> share a profound concern that this trend will harm patients, they argue that courts should apply greater scrutiny to those healthcare-related laws that burden constitutional rights by requiring states to offer evidence that these laws, in fact, advance patient health and safety. Click here to view full brief: <a href="#">National Physicians Alliance, American Academy of Nursing, Center for American Progress D/B/A Doctors for America, American Nurses Association, and Society for Adolescent Health and Medicine</a></td>
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Amici curiae are (i) the American Public Health Association (“APHA”), an organization whose mission is to champion the health of all people and all communities, strengthen the profession of public health, share the latest research and information, promote best practices, and advocate for public health issues and policies grounded in research, and (ii) deans, departmental chairs, and faculty members with expertise in public health and public health law from some of the leading schools of public health, nursing, law, business, public service, public policy, and medicine in the United States. Amici believe it is critical to the public health interests of the United States that all women have meaningful access to reproductive health services, including abortion. They support Petitioners and object to Texas House Bill No. 2 (“HB 2”) because the two challenged requirements are harmful and medically unnecessary and create a grave risk to public health. The two challenged requirements of Texas House Bill No. 2 (HB 2)—that providers in Texas have admitting privileges at local hospitals and that facilities meet standards designed for ASCs—have forced or will force the vast majority of legal abortion providers in Texas to close. By forcing clinics to close and leaving the few remaining clinics geographically concentrated in a handful of major cities, the challenged requirements have made it much more difficult for women to obtain reproductive care and have done nothing to make that care any safer for the few women who are still able to obtain it. Without access to safe, local reproductive care, including legal abortion, women’s health suffers. The public health in Texas is particularly vulnerable because of the substantial population of low income women of reproductive age and because of the state’s lack of support for family planning. By stripping the vast majority of the state’s already-vulnerable population of access to safe, legal abortion care, HB 2 creates a substantial risk that women will seek later-term abortions with increased risk, face the serious mental and physical health risks of being forced to carry unwanted pregnancies to term, or resort to illegal abortions. These are serious harms for individual women and their families—but they are also real threats to the overall public health.

Click here to view full brief: Public Health Deans, Department Chairs, and Faculty and the American Public Health Association

The Society of Hospital Medicine is a non-profit professional medical organization, with more than 13,000 members who are practicing hospitalists in the United States. The Society is dedicated to promoting exceptional care for hospitalized patients and improving hospital medicine through both clinical expertise and fluency in the complexities of delivering care in the hospital setting by hospitalists (doctors practicing hospital medicine). The Society opposes laws and policies that impose limitations or requirements on the delivery of health care where those laws are without scientific foundation and do not improve patient care. The Society of Ob/Gyn Hospitalists is a non-profit professional medical society founded in 2011.
Ob/Gyn hospitalists are physicians who specialize in the practice of hospital medicine specific to Obstetrics and Gynecology.

Hospital medicine is a medical specialty dedicated to the delivery of comprehensive medical care to hospitalized patients. Requiring physicians who specialize in low-risk outpatient procedures, such as abortion, to obtain admitting privileges as a condition of performing abortions is inconsistent with the modern practice of medicine and serves no medical function. Patients in need of hospitalization can and are admitted by hospitalists, who coordinate with the patient’s outpatient physician and/or the emergency department to ensure high-quality care. There is no valid medical rationale to require abortion providers to obtain admitting privileges in a nearby hospital. Moreover, hospitals may grant or withhold admitting privileges for business, rather than clinical, reasons.

Click here to view full brief: Society of Hospital Medicine and Society of OB/GYN Hospitalists

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<td><strong>Press Contact:</strong> Philip Lebowitz</td>
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Amici curiae are experienced healthcare practitioners, administrators, managers, consultants and medical school faculty who have served on hospital credentialing committees, medical staff executive committees and hospital boards of trustees. They are submitting this amicus brief to provide the Court with an accurate understanding, based on their extensive personal experience, of the process by which hospital privileges are granted and why an “admitting privileges” requirement presents a significant obstacle to the practice of qualified physicians providing abortion services. Specifically, amici explain that hospitals’ procedures for awarding admitting privileges impose requirements on qualified physicians that, by the very nature of their practice, they are unable to meet. The hospital process evaluates physicians on many factors related to hospitals’ care of patients in inpatient settings that abortion providers, who practice almost exclusively on an outpatient basis, are unable to meet. As a result, the requirement bars qualified physicians from providing abortion services in outpatient centers, and thereby impedes access to those services.

Signers include: Nancy J. Auer, M.D., Jeffrey Borkan, M.D., Ph.D., Jonathan Burroughs, M.D., M.B.A., FACHE, FAAPL, Carol Cairns, CPMSM, CPCS, Dr. William Cors, M.D., MMM, FACPE, David Dodge, Hugh Greeley, Seth Guterman, M.D., FACEP, Kathryn Meyer, J.D., Vicki Noble, M.D., Linda Riggs, CPMSM, Todd Sagin, M.D., J.D., Vicki L. Searcy, Mark Smith, M.D., M.B.A., FACS, Michael Stauder, M.D., FACC, Richard E. Thompson, M.D., Susan I. Toth, M.D., Gregory Volturo, M.D., and Abigail Winkel, M.D. Click here to view full brief: Medical Staff Professionals
### Amici

**Social Science Researchers**

Press Contact: Colleen McGushin | cmcgushin@omm.com

### Summary

Brief for 47 individual social scientists who study abortion in the United States, and the Guttmacher Institute, a non-profit research and policy organization that conducts research on abortion access and evaluates abortion regulations. Relying on rigorous social science research, the brief explains that abortion is already a very safe, common medical procedure and that the two provisions of HB 2 under Supreme Court review—the ambulatory surgical center requirement and the admitting privileges requirement—will not improve patient health or safety. Instead, these provisions will harm women’s health because they dramatically reduce access to safe and legal abortion, thus increasing the likelihood that women will undergo later procedures, carry to term, or attempt to self-induce an abortion, all of which expose women to greater health risks. Research makes clear that, by delaying or effectively denying access to care, HB 2 also has negative mental, emotional, and socioeconomic consequences for women. In short, as this brief explains, “the effect of the admitting privileges and ASC requirements on women’s health and safety will be precisely the opposite of what HB 2’s proponents assert.”

Click here to view full brief: [Social Science Researchers](#)
**THEME:** Millions of Texas women will be adversely impacted by these restrictions. (11 briefs)

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<td><strong>National Abortion Federation and Abortion Providers</strong>&lt;br&gt;Press Contacts:&lt;br&gt;Melissa Fowler</td>
<td>The National Abortion Federation (&quot;NAF&quot;) and several of its member providers filed an <em>amici curiae</em> brief in support of Petitioners Whole Woman’s Health, et al. on January 4, 2016, arguing that certain provisions of Texas’s H.B.2 anti-choice bill should be struck down as an unconstitutional abridgement of a woman’s right to choose abortion care. In its brief, NAF demonstrated that the closures of abortion care providers were a direct result of H.B.2, roughly halving the number of providers in Texas from over 40 to approximately 19. Moreover, NAF explained that—but for the Supreme Court’s stay of the Fifth Circuit ruling—this number would have been roughly halved yet again, leaving vast swaths of Texas without any abortion care providers. Contrary to the state’s arguments, NAF explained—using, <em>inter alia</em>, first-hand knowledge and data gathered from its members—that it is absurd to conclude that the few remaining facilities would be able to keep up with the demand for abortion care after H.B.2 would close 75% of clinics in Texas, or that new facilities compliant with the medically unnecessary ambulatory surgical center requirements would, or could, be built to replace closing facilities. NAF then demonstrated the severity of the burden placed on women in Texas, all but foreclosing the ability of many women to exercise their constitutional right to choose, by pointing out the very real and very significant emotional, financial, and personal health consequences for women in Texas. Notably, NAF and its members have witnessed first-hand that many women in Texas must travel greatly expanded distances to access care; the excessive delays and growing wait times (quadrupling in some cases) as a result of the reduction of facilities and inability of the remaining facilities to keep up with demand; the enhanced costs and health risks posed by pushing women further into their pregnancies; and finally the reality that more and more women are attempting to self-induce abortions in this climate that is increasingly hostile to legal abortion care. As a result of the significantly harmful consequences of H.B.2 for women in Texas, NAF urged the Court to agree with the Petitioners, and hold the challenged provisions of H.B.2 unconstitutional.</td>
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<td>Melissa Fowler</td>
<td><a href="mailto:mowler@prochoice.org">mfowler@prochoice.org</a></td>
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<td><strong>Planned Parenthood Federation of America,</strong>&lt;br&gt;<strong>Planned Parenthood of Greater Texas Surgical Health Services,</strong> <strong>Planned Parenthood Center for Choice,</strong> and <strong>Planned Parenthood South Texas Surgical Center</strong></td>
<td>The brief filed by Planned Parenthood Federation of America and the three Texas Planned Parenthood affiliates that provide safe, legal abortion (Planned Parenthood of Greater Texas Surgical Health Services, Planned Parenthood Center for Choice, and Planned Parenthood South Texas Surgical Center) demonstrates that if the challenged Texas restrictions are permitted to take effect, the ruling will have a devastating impact on Texas women and on a woman’s right to access safe, legal abortion in the United States. As a health care provider,</td>
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<td><a href="#">Click here to view full brief: National Abortion Federation and Abortion Providers</a></td>
<td><a href="#">Click here to view full brief: Planned Parenthood Federation of America, Planned Parenthood of Greater Texas Surgical Health Services, Planned Parenthood Center for Choice, and Planned Parenthood South Texas Surgical Center</a></td>
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Planned Parenthood saw the dire consequences for women when the Texas ASC restrictions went into effect for nearly two weeks in October 2014 and a dozen providers shuttered their operations overnight. Planned Parenthood’s remaining health centers were inundated with desperate phone calls from women who had planned to obtain care at those providers. Furthermore, the realities of building and operating ASCs that provide abortions in Texas, as well as complying with other medically unnecessary restrictions such as the admitting privileges requirement in an environment that is hostile to abortion, will prevent new ASCs from opening and the existing ASCs from expanding. The brief also demonstrates that the consequences of the Court’s ruling will reverberate far beyond Texas to cases around the country challenging admitting privileges requirements and other abortion restrictions that purport to further women’s health but do just the opposite by blocking access to safe medical care. It is critical to women’s ability to continue to access safe abortion in the United States that the Court’s ruling requires meaningful review of laws that restrict abortion under the guise of promoting women’s health because in reality these laws hurt women by blocking access to safe, legal abortion.

Click here to view full brief: Planned Parenthood Federation of America, Planned Parenthood of Greater Texas Surgical Health Services, Planned Parenthood Center for Choice, and Planned Parenthood South Texas Surgical Center

The brief of the National Latina Institute for Reproductive Health and nine local and national Latino/a organizations rests on the internationally recognized principle that states cannot create impediments that practically deny women access to the healthcare to which they have a recognized right. The brief provides international authorities for this bedrock human rights principle and then describes the impact of HB 2 on the 2.5 million Latinas of reproductive-age in Texas. Texas Latinas already face significant challenges in accessing healthcare. For these women, the scarcity of appointments, increased wait times, cost and travel distances resulting from clinic closures will be a substantial, and in many cases insurmountable, obstacle to accessing legal abortion services. The brief ends by documenting that where women lack access to legal abortion services, there is an increased rate of illegal and unsafe abortions, creating risks to women’s health.


Click here to view full brief: National Latina Institute for Reproductive Health
Twelve Organizations Dedicated to the Fight for Reproductive Justice

Press Contacts:
Michelle Batchelor | michelle@blackrj.org
Antoinette McGovern | amcgovern@willkie.com

The brief filed on behalf of 12 organizations dedicated to the fight for a woman’s right to control her body, sexuality, gender, work, and reproduction (“Reproductive Justice”) focuses on the devastating impact the challenged provisions of HB 2 will have on African-American women in Texas. The brief details the systemic barriers African-American women have faced and continue to face in accessing quality reproductive healthcare and the inferior health outcomes they experience as a result, including higher risk of maternal morbidity, higher rates of preterm delivery and sexually transmitted infections, and higher mortality rates from breast cancer and cervical cancer. The brief argues that a significant number of women seeking abortion and other reproductive health services from the closed and threatened clinics are African American and that, because of the economic inequality and lack of access to health insurance they face, it is extremely unlikely that African-American women will be able to overcome the substantial obstacles imposed by the challenged HB 2 provisions. As a result, the challenged HB 2 provisions will have the practical effect of barring many African-American women in Texas from exercising their right to obtain a pre-viability abortion outright and, thus, are unconstitutional.

Signers include: In Our Own Voice: National Black Women’s Reproductive Justice Agenda; The Afiya Center; Access Reproductive Care-Southeast; Black Women for Wellness; Black Women’s Health Imperative; New Voices for Reproductive Justice; SisterLove, Inc.; SisterReach; SisterSong – The National Women of Color Reproductive Justice Collective; SPARK Reproductive Justice NOW!; URGE: United for Reproductive & Gender Equity; Women With a Vision, Inc.

Click here to view full brief: Twelve Organizations Dedicated to the Fight for Reproductive Justice

Service Women’s Action Network and Retired or Former Military Officers

Press Contact:
Amy Malsin | amy.malsin@shearman.com

The Service Women’s Action Network (“SWAN”) and numerous retired or former military officers submitted an amicus brief in support of Petitioners. SWAN is a nonpartisan, nonprofit organization that advocates for the increasing number of women who serve, or have served, in our nation’s military. The individual amici are retired or former officers of the U.S. military who have had decades of extensive experience and accomplishment in military leadership. These amici support protecting service women’s constitutional rights and access to health care and have an interest in furthering such goals. This amicus brief seeks to inform the Supreme Court as to the particular burdens that Texas House Bill 2 (“HB 2”) imposes on the constitutional rights of women serving in the armed forces. The drastic reduction of abortion service providers in Texas resulting from HB 2 particularly burdens female military members’ constitutional rights, due to specific characteristics of military service. With ten or fewer abortion providers likely to remain open in Texas, many service women in the numerous military bases in that state will be left without any
reasonably accessible providers. Service women cannot choose where they are based, and they cannot travel at will to distant abortion care providers. HB 2’s burdens on service women are particularly objectionable as women continue, and are increasingly recognized, to be a growing and vital part of the United States’ armed forces. Furthermore, failing to protect service women’s constitutional rights may undermine maintaining and perfecting a diverse and effective armed forces.


Click here to view full brief: Service Women's Action Network and Retired or Former Military Officers

The Texas Association Against Sexual Assault, The Black Women’s Health Initiative, The National Sexual Violence Resource Center, Melisa Holmes, M.D., and Professor Margaret Drew

Press Contacts:
Ted Rutherford | trutherford@taasa.org
Darryl Van Duch | Darryl.VanDuch@aporter.com

The amicus brief filed by the Texas Association Against Sexual Assault and other leading entities and individuals working to prevent and respond to sexual violence against women addresses HB 2’s harmful impact on victims of rape who become pregnant as a result of the rape. The brief argues that Texas should not be permitted to undermine Planned Parenthood of Southeastern Pennsylvania v. Casey by creating barriers that restrict access to abortion for rape-related pregnancies. Extensive research by the Center for Disease Control and other governmental and academic sources demonstrates that rape and pregnancy resulting from rape are far more commonplace than is usually acknowledged. Moreover, rape victims fall disproportionately within the intersection of poverty, minority status, domestic violence, reproductive coercion, and other groups that often struggle to access healthcare. By eliminating 75% of the clinics in Texas – and leaving only one clinic in operation outside the four largest cities – HB 2 will severely restrict, if not effectively eliminate, access to abortion for already traumatized rape victims – especially those from the most vulnerable populations – seeking to terminate their rape-related pregnancies, thereby re-traumatizing them. In addition to TAASA, the brief was co-signed by The Black Women’s Health Initiative, The National Sexual Violence Resource Center, Melisa Holmes, M.D., and Professor Margaret Drew.

Click here to view full brief: The Texas Association Against Sexual Assault, The Black Women's Health Initiative, The National Sexual Violence Resource Center, Melisa Holmes, M.D., and Professor Margaret Drew
Experts and Organizations Supporting Survivors of Intimate Partner Violence

Press Contact:
Sarah McDonald | smacdonald@legalvoice.org

32 of the nation’s leading law professors, researchers, and advocacy organizations in the field of intimate partner violence filed an amicus curiae brief in Whole Woman’s Health v. Cole. These experts are concerned that if Texas’ unnecessary restrictions on abortion providers are upheld, survivors of intimate partner violence will be forced to continue coerced, unwanted, and potentially dangerous pregnancies. As the brief explains, abusive partners often use both rape and “reproductive coercion” – which includes sabotaging birth control, refusing to allow the use of birth control, and other tactics – to control their intimate partners. These attacks frequently result in unintended, coerced pregnancies, and pregnant survivors often choose to have an abortion. For many survivors, ending a pregnancy will help ensure that they can get away from the abusive partner, and avoid further violence. But getting an abortion can be extremely difficult for a woman in an abusive relationship, because her abuser may control her access to finances, transportation, and health care. The closure of abortion clinics across Texas will make it even harder, and in some cases impossible, for a woman in an abusive relationship to access abortion.

Click here to view full brief: Experts and Organizations Supporting Survivors of Intimate Partner Violence

National Network of Abortion Funds and 41 Member Abortion Funds

Press Contacts:
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Nathan Carlile | Nathan.carlile@arentfox.com

The National Network of Abortion Funds builds the capacity and power of its network of member organizations that provide funding, transportation, childcare and doula support for low-income people seeking abortions. In their amicus brief they explain how Texas regulations harm low-income patients through abortion clinic closures, increasing wait times at the remaining clinics and forcing people who seek an abortion to travel longer distances. These factors significantly increase the cost of the procedure, costs for transportation, childcare needs, and lost wages. Consequently, the current regulations threaten the financial stability of low-income families who struggle to afford these costs, and are less likely to have support systems to assist them through what is already an emotionally and logistically challenging time. To illustrate what is at stake for Texans, the amicus brief includes stories of several low-income people who attempted to obtain an abortion in Texas. Without regulatory obstructions, these patients can better take care of their families and avoid the financial implications that can result from an unwanted pregnancy.

Click here to view full brief: National Network of Abortion Funds

Jane’s Due Process, Inc.

Press Contact:
Susan Hays | hayslaw@me.com

Jane’s Due Process (JDP) is a nonprofit legal referral service for Texas minors facing unintended pregnancies. JDP has submitted an amicus brief to explain that the two challenged provisions of HB 2 must be assessed in the context of other abortion restrictions that are already in place in Texas. HB 2 interacts with other medically unnecessary and
often harmful restrictions to construct obstacles to abortion care that are insurmountable for many women, and burden most the women and teenagers who can bear it the least. This Court must critically examine both the purpose and effect of these harmful restrictions, in order to protect the liberty of women in Texas.

Click here to view full brief: Jane’s Due Process, Inc.

Institute for Women’s Policy Research, National Association of Social Workers, Texas Chapter of National Association of Social Workers, and Re:Gender

Press Contact:
Patricia T. Lojo | PLojo@jenner.com

Amici the Institute for Women’s Policy Research, the National Association of Social Workers, the Texas Chapter of the National Association of Social Workers, and Re:Gender (formerly the National Council for Research on Women) are organizations committed to improving the health and well-being of women and their families nationally and in the state of Texas. They have submitted an amicus brief in support of the Petitioners in Whole Woman’s Health v. Cole that sets forth the particularly poor health and well-being outcomes facing women and their families in the state of Texas, including higher cancer incidence and mortality rates, lower life expectancy, and lack of access to affordable health and prenatal care. The brief explains how these poor health outcomes in part reflect policy choices of the Texas legislature. Amici recognize that the issues raised by this case are the subject of deep legal and political disagreement, but what should be beyond dispute is that women and children in Texas should not suffer from markedly worse health and access to health care than women and children in the rest of the United States. Thus, although Texas has justified HB 2 as legislation intended to improve the health of women in the state, Texas’s track record suggests otherwise, and the Supreme Court should take into account Texas’s failure to implement various health promotion policies as it assesses whether the stated purpose behind HB 2 withstands constitutional scrutiny.

Click here to view full brief: Institute for Women's Policy Research, National Association of Social Workers, Texas Chapter of National Association of Social Workers, and Re:Gender


This brief by National Advocates for Pregnant Women, joined by 13 other organizations, argues that the challenged provisions of the Texas law will prevent some women from having abortions; result in others having abortions outside of safe medical settings; and make those who do so more vulnerable to arrest and prosecution. The brief highlights the case of Jennie Linn McCormack, a mother of three, who lived 138 miles from the nearest abortion provider. Ms. McCormack was charged with unlawful abortion because she ended her pregnancy at home with medication obtained online. That case and hundreds of arrests of pregnant women nationwide illustrate that the Whole Woman’s Health v. Cole decision has profound implications not only for women’s liberty in reproductive decision-making, but also for women’s liberty in its most concrete sense: freedom from arrest, prosecution, and detention. The brief also explains why a woman’s regrets about an abortion
**Press Contact:**
Cynthia R. Greenlee  
crg@advocatesforpregnantwomen.org

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<th>Project, and Women on the Rise Telling Herstory (“WORTH”)</th>
<th>decision or belief that her health was harmed by the procedure are not justification for HB 2’s provisions, which radically reduce access to abortion services in Texas. The brief calls on the Court, consistent with <em>Casey</em> and <em>Roe</em>, to reject such false and paternalistic rationales that deny the fact that all pregnancies and pregnancy outcomes have profound risks and consequences. Such risks and potential consequences are compelling reasons to respect, not undermine, women’s decision-making competency and health-care access.</th>
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THEME: Legal experts explain the errors in the Fifth Circuit’s decision in this case and urge reversal (6 briefs)

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<th>Amici</th>
<th>Summary</th>
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<td>Constitutional Law Scholars Ashutosh Bhagwat, Lee Bollinger, Erwin Chemerinsky, Walter E. Dellinger III, Michael C. Dorf, Daniel Farber, Barry Friedman, Pamela S. Karlan, Gillian E. Metzger, Frank Michelman, Jane S. Schacter, Suzanna Sherry, Reva Siegel, Geoffrey R. Stone, David A. Strauss, and Laurence Tribe</td>
<td>The <em>amicus</em> brief, filed by sixteen constitutional law scholars, sets forth the <em>amicis</em> considered understanding of the framework governing abortion regulation, as established by the decisions of the Supreme Court. The brief discusses the careful balance that the Court established in the <em>Planned Parenthood v. Casey</em> decision – restricting both the interests a state may pursue in regulating abortion and the means it may use to do so. The undue burden test requires that courts engage in careful scrutiny of abortion restrictions that purport to be health regulations, both to address the risk of pretextual laws and to protect against undue burdens on women’s constitutional right to choose whether and when to bear a child. As the <em>amicis</em> state, “[b]ecause the public continues to be deeply and fiercely divided over whether a woman should have the right to end her pregnancy, legislators may attempt to evade <em>Casey</em>’s restrictions on the permissible means of promoting potential life by imposing unnecessary and burdensome regulations in the name of women’s health.” Careful scrutiny by the courts will guard against that risk. As part of that scrutiny, courts must consider whether the purported health regulations are actually designed to advance women’s health, whether the health benefits of the regulations justify the burdens imposed, and whether the regulations create a substantial obstacle to abortion access. The challenged Texas regulations clearly fail this analysis and are unconstitutional. Click here to view full brief: <a href="https://example.com">Constitutional Law Scholars Ashutosh Bhagwat, Lee Bollinger, Erwin Chemerinsky, Walter E. Dellinger III, Michael C. Dorf, Daniel Farber, Barry Friedman, Pamela S. Karlan, Gillian E. Metzger, Frank Michelman, Jane S. Schacter, Suzanna Sherry, Reva Siegel, Geoffrey R. Stone, David A. Strauss, and Laurence Tribe</a></td>
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Information Society Project at Yale Law School

| Press Contact: Janet Conroy | In 1992, *Planned Parenthood v. Casey* struck a delicate balance between a woman’s “free choice” to have an abortion and the state’s interest in promoting potential life over abortion. To preserve this “*Casey* compromise,” courts must independently examine whether health-justified abortion restrictions actually further health-related ends and do not instead seek to protect potential life by unconstitutional means. The Fifth Circuit’s decision below mandating extreme judicial deference is inconsistent with the Supreme Court’s decisions in *Casey* and in *Gonzales v. Carhart*. |

Press Contacts:
Professor Geoffrey Stone | gstone@uchicago.edu
School Contact: news@uchicago.edu

Gillian Metzger | gmetzg1@law.columbia.edu
School Contact: Nancy Goldfarb | nancy.goldfarb@law.columbia.edu

Information Society Project at Yale Law School

Press Contact: Janet Conroy | publicaffairs.law@yale.edu

In 1992, *Planned Parenthood v. Casey* struck a delicate balance between a woman’s “free choice” to have an abortion and the state’s interest in promoting potential life over abortion. To preserve this “*Casey* compromise,” courts must independently examine whether health-justified abortion restrictions actually further health-related ends and do not instead seek to protect potential life by unconstitutional means. The Fifth Circuit’s decision below mandating extreme judicial deference is inconsistent with the Supreme Court’s decisions in *Casey* and in *Gonzales v. Carhart*. |
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<th><strong>Law Professors Melissa Murray, I. Glenn Cohen and B. Jessie Hill</strong></th>
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<td><strong>Press Contacts:</strong></td>
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<tr>
<td>Melissa Murray</td>
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<td>School Contact: Susan Gluss</td>
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<td>I. Glenn Cohen</td>
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<td>School Contact: Michelle Deakin</td>
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<td>Law professors Melissa Murray, I. Glenn Cohen, and B. Jessie Hill have submitted an amicus brief supporting the petitioners in <em>Whole Woman’s Health v. Cole.</em> <em>Cole,</em> which will be heard by the Supreme Court on March 2, 2016, challenges the constitutionality of certain provisions of Texas’ abortion statute, House Bill 2 (HB 2). The brief focuses on the ways in which HB 2, which severely reduces access to abortion in Texas, harms women’s dignity and equality. The brief argues that the dignitary harms that HB 2 imposes on women, no less than the law’s material burdens, make it an unconstitutional undue burden on the right to choose abortion under the Supreme Court’s decision in <em>Planned Parenthood v. Casey.</em> Moreover, the Court’s recent decisions establishing constitutional protection for gays and lesbians in <em>Lawrence v. Texas,</em> <em>United States v. Windsor,</em> and <em>Obergefell v. Hodges</em> confirm that the Constitution requires the state to respect a woman’s dignity and status as an equal citizen by allowing her the opportunity to decide for herself whether or not to have a child, free from undue state interference and state-imposed stigma. By singling out the abortion procedure for uniquely onerous regulation, and turning Texas women into reproductive refugees who must travel significant distances in order to exercise their constitutionally-protected rights, HB 2 deprives women of their dignity and status as equal citizens, in violation of the Due Process Clause.</td>
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<td>Click here to view full brief: <a href="#">Law Professors Melissa Murray, I. Glenn Cohen, and B. Jessie Hill</a></td>
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<th><strong>Constitutional Accountability Center</strong></th>
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<td><strong>Press Contact:</strong></td>
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<tr>
<td>Doug Pennington</td>
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<td>Constitutional Accountability Center’s amicus brief demonstrates that the text and history of the Fourteenth Amendment protect personal individual rights essential to liberty, dignity and autonomy and require courts to carefully review state legislation impinging on individual liberty. History shows that the Framers of the Fourteenth Amendment wrote the Amendment to provide broad protections of substantive liberty--not limited to rights enumerated elsewhere in the Constitution--to broadly secure equal citizenship stature for men and women of all races and classes. The Fourteenth Amendment’s guarantee of substantive liberty, together with its guarantee of equality, ensure the full promise of freedom, guaranteeing to all equal dignity in the eyes of the law. In refusing to meaningfully scrutinize state laws that would close more than 75 percent of abortion clinics in Texas, the Fifth Circuit failed to protect the full scope of liberty guaranteed by the Fourteenth Amendment and to fulfill the constitutionally mandated role of courts in securing personal liberty and equal dignity for all.</td>
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<td>Click here to view full brief: <a href="#">Constitutional Accountability Center</a></td>
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This brief demonstrates how landmark decisions vindicating the rights of LGBT people compel the conclusion that the constitutional right to an abortion finds protection under the Equal Protection Clause as well as the Due Process Clause. Courts must scrutinize closely the legislative justifications for abortion restrictions that unduly burden women, not only because the Due Process Clause requires it, but because these laws infringe on women’s equal dignity and ability to participate in society relative to men, in violation of the Equal Protection Clause.

Additionally, women who exercise their constitutional right to abortion experience stigma and discrimination, not unlike the stigma and discrimination experienced by lesbian, bisexual, gay, and transgender people, causing many to feel as though they must conceal that they have had an abortion, or their sexual orientation or gender identity—keeping them “in the closet” and preventing them from advocating effectively on their own behalf in legislatures. Courts have recognized this dynamic in cases involving lesbian and gay people by scrutinizing closely legislation targeting them. A similar dynamic exists here, and equality principles similarly require courts to scrutinize closely the legislative justifications for abortion regulations to determine whether they serve their stated purposes, and whether those purposes have a basis in fact.

Click here to view full brief: Lambda Legal Defense and Education Fund, Inc.

The New York City Bar Association (“City Bar”), through its Sex & Law, Domestic Violence, Civil Rights, LGBT Rights and Women in the Legal Profession Committees, filed a brief in support of Petitioners in which it argued that the Fifth Circuit erred in finding the contested provisions of H.B.2 constitutional. The City Bar is a professional organization of over 24,000 attorneys from the New York City metropolitan area, across the United States and over 50 countries, with over 160 standing and special committees devoted to promoting legal reform and improving the administration of justice. The five committees that contributed to the brief have broad expertise in the areas of civil rights and civil liberties, gender equality and reproductive rights. The City Bar’s *amicus* brief argues that the Fifth Circuit abdicated its affirmative duty to review legislative findings when constitutional rights are at stake—thereby abandoning the essential role of the judiciary as a crucial “check” on legislative overreach and reducing the role of the courts to a mere rubber stamp. And, in accepting the state’s rationale for the contested regulations wholesale, the Fifth Circuit failed to apply the “undue burden” standard articulated by the Supreme Court in *Planned Parenthood v. Casey*, and instead applied a standard akin to the most deferential form of rational basis review in a manner wholly inconsistent with Supreme Court jurisprudence. The City Bar further argues that H.B.2’s admitting privileges requirement is an improper delegation of legislative power to private hospitals and therefore offends due process. Because the challenged provisions drastically curtail—and, for many, eliminate—
access to safe abortion care in Texas without advancing women’s health, H.B.2 presents a substantial obstacle to women’s access to abortion services and is unconstitutional.

Click here to view full brief: The New York City Bar Association
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<td><strong>American Civil Liberties Union, The ACLU of Alabama, and the ACLU of Wisconsin</strong>&lt;br&gt;PRESS CONTACT: Jaweer Brown <strong><a href="mailto:JBrown@aclu.org">JBrown@aclu.org</a></strong></td>
<td>The American Civil Liberties Union filed an <em>amicus</em> brief that helps to put the Texas case in context, because Texas is not the only state that has enacted laws that would wipe out access to abortion under the false pretense of protecting women. As the brief explains, just before the trial in the Texas case, federal courts in Alabama and Wisconsin conducted trials in challenges to laws that were very similar to one of the requirements being challenged in <em>Whole Woman’s Health</em>—the admitting privileges requirement, which forces abortion clinics to close if their doctors cannot obtain admitting privileges at a hospital near the clinic. The Alabama and Wisconsin courts reviewed extensive medical evidence, including much of the same evidence at issue in the Texas case, and issued lengthy decisions that blocked the enforcement of those laws. As the ACLU’s brief explains, upon considering extensive medical evidence and testimony from expert witnesses, all three courts reached the exact same conclusion, which is that laws like the one in Texas do nothing to improve the safety of abortion (which is already an incredibly safe medical procedure), and would instead harm the very women the laws falsely purport to protect by significantly reducing access to safe, legal abortion. The brief shows that enforcing an admitting privileges requirement like the one in <em>Whole Woman’s Health</em> would close four out of the five abortion clinics in Alabama, leaving a single physician in the entire state to care for women seeking abortion services, and would lead to delays of eight to ten weeks for women seeking abortions in Wisconsin due to profoundly reduced access. The consensus among these courts was that far from improving the safety of abortion, laws like the one in Texas inflict profound harm on women seeking abortion services. Click here to view full brief: <a href="#">American Civil Liberties Union, The ACLU of Alabama, and the ACLU of Wisconsin</a></td>
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| **Scientists, Science Educators, Skeptics, the Center for Inquiry, and the Richard Dawkins Foundation for Research and Science**<br>PRESS CONTACT: Paul Fidalgo **PFidalgo@centerforinquiry.net** | The Center for Inquiry, a nonprofit educational organization dedicated to promoting and defending reason, science, and freedom of inquiry, joined by the Richard Dawkins Foundation for Reason & Science, filed a brief on behalf of over 40 eminent scientists, science educators, and skeptics. The brief argues that courts cannot fulfill their function -- defending constitutional liberties -- if presented with inaccurate and unreliable testimony from those claiming to be experts. The expert witnesses put forward by Texas to defend HB 2 did not present scientific evidence, but instead outright pseudoscience, with coordination and direction from Vincent Rue, a long-discredited anti-abortion partisan with no medical credentials. The signers of the brief believe that, regardless of any individual’s opinion regarding abortion, pseudoscientific testimony such as this cannot be permitted to usurp the
role of fact-based, scientific testimony in the court system. The brief seeks to defend the integrity of science and its role in the judicial system.

Click here to view full brief: Scientists, Science Educators, Skeptics, The Center for Inquiry, and The Richard Dawkins Foundation for Research and Science

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The National Center for Lesbian Rights and thirteen other LGBT, health and racial justice organizations urge the Court to look carefully at Texas’ justifications for its draconian restrictions on abortion providers, just as the Court has done with other laws that infringe upon fundamental freedoms. The State of Texas has argued that the law protects the health of women seeking abortion, but the evidence at trial showed just the opposite. U.S. history is replete with attempts to use pseudoscience and unsupported health-related justifications to exclude individuals and groups from the full protection of essential constitutional liberties, including laws barring interracial marriage, excluding women from certain professions, permitting the forced sterilization of those deemed “inferior,” and criminalizing and discriminating against LGBT people. NCLR and its fellow *amicus* urge the Court to remember this history and to fulfill its constitutional obligation to look carefully at the State’s asserted justifications for restricting women’s fundamental right to reproductive autonomy.


Press Contact: 
Erik Olvera | EOlvera@nclrights.org
### Theme: Women and Physicians Share Their Stories About Obtaining or Providing Abortion (5 Briefs)

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<td><strong>Janice MacAvoy, Janie Schulman, and Over 110 Other Women in the Legal Profession Who Have Exercised Their Constitutional Right to an Abortion</strong></td>
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<td>Press Contact: Lisa Green</td>
<td>113 attorneys, retired attorneys, law professors, and law students who have obtained abortions argue that their experiences demonstrate the real world effects of reproductive freedom on the lives and careers of women lawyers, and underscore the truth of the Court’s observation in <em>Planned Parenthood v. Casey</em> that abortion access facilitates women’s ability “to participate in the economic and social life of the Nation.” 505 U.S. 833, 856 (1992).</td>
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<td><strong>The Honorable Wendy Davis, Teresa Fedor, Lucy Flores, and Judy Nicastro</strong></td>
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<td>Press Contacts: For Wendy Davis: Hector Nieto</td>
<td>The brief argues that the constitutional rights—recognized and reaffirmed by the Court—to liberty, dignity, and autonomy over one’s body and destiny, are in jeopardy if the provisions of the Texas law at issue are allowed to stand and meaningfully restrict women’s access to reproductive choice.</td>
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<td>Beth Huffman</td>
<td>Click here to view full brief: Janice MacAvoy, Janie Schulman, and Over 110 Other Women in the Legal Profession Who Have Exercised Their Constitutional Right to an Abortion</td>
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<td><a href="mailto:Elizabeth.huffman@dechert.com">Elizabeth.huffman@dechert.com</a></td>
<td><strong>The brief is submitted on behalf of four current or former women legislators who have publicly disclosed their own abortion narratives. Texas State Senator Wendy Davis, one of the <em>amici,</em> famously stood in her pink tennis shoes for thirteen hours to filibuster against an earlier version of HB 2, the statute at issue in <em>Whole Woman’s Health.</em></strong></td>
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<td><strong>The brief argues that the refusal of the bill’s sponsor to answer Senator Davis’s repeated requests for evidence that Texas’s abortion clinics were unsafe, together with an extra-legislative statement by the President of the Texas Senate that the bill was intended to “essentially ban abortion state-wide,” demonstrate that the stated purpose of the bill—to safeguard women’s health—was a sham. Texas’s own regulatory data, which showed that abortions were already safe for women in Texas, support this conclusion.</strong></td>
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The brief sets out the personal narratives of the four women legislators, who terminated pregnancies at different stages of life and for different reasons, as well as the backlash that they have endured for making their choices known. Each of the women legislators underwent the procedure at a nearby doctor’s office or clinic, an option that will not be available to many poor or low-income Texas women should HB 2 remain law.

Click here to view full brief: The Honorable Wendy Davis, Teresa Fedor, Lucy Flores, and Judy Nicastro

| Kate Banfield, Jo Baxter, Amy Brenneman, Elizabeth Driehaus, Anne Fowler, Carol McCleary, Suzanne Poppema, Sheila Schroeder, Leni Silverstein and Jennifer Steffen |
| Amici Kate Banfield, Jo Baxter, Amy Brenneman, Elizabeth Driehaus, Anne Fowler, Carol McCleary, Suzanne Poppema, Sheila Schroeder, Leni Silverstein and Jennifer Steffen are proud Americans and conscientious, moral and caring members of our communities who chose to have an abortion. They have come forward to share with the Court the deeply intimate and personal stories of their choice and how it has impacted their lives. Amici are a computer science professor, a leader in the financial services industry, an anthropologist and human rights activist, a member of the clergy, a famous actress, a public relations professional, authors, doctors, wives, and mothers. Communities large and small have benefitted from amici’s fulfillment of their aspirations. Amici share their stories so the Court, in assessing the challenged provisions of Texas House Bill 2, can consider not only the Court’s prior decisions recognizing that the right to access an abortion is a constitutionally protected liberty that is fundamental to a woman’s dignity and autonomy, but also the real-life dimensions of a woman’s right to control her reproductive life: the reasons why women choose abortion, what women go through to access the procedure, and the importance of reasonable access to abortion to women’s ability to determine their life paths, their careers and their families. Amici come from different walks of life and have achieved personal and professional success in different ways. But together, their stories counter the notion that women who have abortions believe they made the wrong decision; vividly demonstrate that access to abortion can be crucial to a woman’s ability to determine her future, achieve her dreams and be an equal participant in our society; and show that barriers to access, such as the challenged provisions of HB 2, should not be allowed to eviscerate the constitutional right to abortion. |
| Click here to view full brief: Kate Banfield, Jo Baxter, Amy Brenneman, Elizabeth Driehaus, Anne Fowler, Carol McCleary, Suzanne Poppema, Sheila Schroeder, Leni Silverstein, and Jennifer Steffen |

| Advocates for Youth |
| For more than three decades, Advocates for Youth has partnered with youth leaders, adult allies, and youth-serving organizations to advocate for effective adolescent reproductive and sexual health programs and policies. As part of that work, Advocates for Youth initiated the 1 in 3 Campaign to encourage women who have had abortions to share their stories and open |
| Press Contacts: Rachel Cooke | rachel@advocatesforyouth.org |
up a rich personal conversation about abortion in our society. In *Whole Woman’s Health v. Cole*, Advocates for Youth submitted an *amicus* brief that contains a cross-section of the personal experiences women have shared with the 1 in 3 Campaign. Their stories illustrate that access to safe abortion care is essential to women’s dignity, autonomy, and ability to participate equally in society.

Click here to view full brief: [Advocates for Youth](#)

**Physicians for Reproductive Health**

Press Contact:
Dana Rasso | [dana@prh.org](mailto:dana@prh.org)

Physicians for Reproductive Health is a doctor-led nonprofit that seeks to share the physician’s distinctive voice, expertise, and experience in public discussions of reproductive health care. Its members, which include over 3,000 physicians, know first-hand the toll that abortion restrictions like the ones at issue in this case take on women’s health. Through a combination of first-person accounts from physicians who provide abortion care and conventional legal arguments, Physicians for Reproductive Health’s *amicus* brief argues that physicians who provide abortion care are highly trained and have a long track record of delivering care that is high quality, compassionate, and extremely safe. As the physicians whose narratives appear in the brief exemplify, physicians who provide abortion care are deeply committed to providing that care even in the face of increasing challenges and harassment. Texas’s onerous regulations restrict women’s access to precisely the sort of highly trained, experienced and ethical physicians who ought to be delivering abortion care. By delaying care, forcing women to travel further to obtain care, and disrupting continuity of care, they threaten the health of the very women they purport to protect, while doing nothing to improve safety.

Click here to view full brief: [Physicians for Reproductive Health](#)
**Amici**

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<th>National Women’s Law Center and 47 Additional Organizations Committed to Equality and Economic Opportunity for Women</th>
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<td>Press Contact: Maria Patrick</td>
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**Summary**

The National Women’s Law Center is submitting an amicus brief on behalf of 48 organizations committed to obtaining full legal, economic, and social equality for women and economic security for women and families. This brief highlights the negative impacts that the restrictions at issue in this case have on women’s economic security and equal participation in social and economic life. These include significant, and in some cases, insurmountable, costs that threaten women’s financial well-being, job security, workforce participation, and educational attainment. Such costs have a particularly harmful impact on low-income women, women of color, women in low-wage jobs, and women who already have children. These effects deprive women of equal dignity promised by the Constitution, unduly burdening women’s reproductive decision-making.

Signers include: 9to5, National Association of Working Women; Abortion Care Network; Anti-Defamation League; Anti-Defamation League; Alliance for a Just Society; Alliance for Justice; American Association of University Women; American Sexual Health Association; Asian Americans Advancing Justice | AAJC; Black Women’s Health Imperative; California Women Lawyers; California Women’s Law Center; Chicago Foundation for Women; Connecticut Citizen Action Group; Connecticut Women’s Education and Legal Fund; District of Columbia Employment Justice Center; Equal Rights Advocates; Feminist Majority Foundation; Hadassah; Institute for Science and Human Values; Jewish Women International; Legal Momentum; Mabel Wadsworth Women’s Health Center; Maine Women’s Lobby; NARAL Pro-Choice America; National Asian Pacific American Women’s Forum; National Association of Women Lawyers; National Center for Transgender Equality; National Congress of Black Women, Inc.; National Family Planning & Reproductive Health Association; National Institute for Reproductive Health; National Organization for Women, Inc.; National Women’s Health Network; North Dakota Women’s Network; People For the American Way Foundation; Raising Women’s Voices for the Health Care We Need; Reproductive Health Access Project; Reproductive Health Technologies Project; Sargent Shriver National Center on Poverty Law; Secular Woman; Service Employees International Union; Southwest Women’s Law Center; UltraViolet; USAction; Women of Reform Judaism; Women’s Bar Association of the District of Columbia; Women’s Media Center; Women’s Law Center of Maryland, Inc.

Click here to view full brief: National Women's Law Center and 47 Additional Organizations Committed to Equality and Economic Opportunity for Women

**Business Leaders**

Brief submitted by 60 individual business leaders and academics. Relying on the research of numerous economic and social science studies, this brief explains that businesses suffer
when women do not have meaningful access to the full range of reproductive services, including abortion. In the past several decades, women have not only entered the workforce in increasing numbers, they have progressed to leadership roles and have driven their employers to greater success. This advancement has been aided in part by women’s access to legal abortion and the corresponding ability to decide whether and when to they have children. The challenged provisions of HB 2 will negatively affect businesses as it will require women employees to travel farther distances to obtain an abortion, increasing absences and reducing productivity at work. In addition to citing the studies that show how health impacts productivity and employee well-being, this brief includes testimonials of veteran business leaders on the importance of abortion access for their employees. As Former Google executive Kim Malone Scott explained: “Putting unnecessary obstacles in the way of simple, cost-effective health services damages everyone.”


Click here to view full brief: Business Leaders
The United States explains that though the balance struck by the Court in Planned Parenthood v. Casey gives significant weight to the governmental interest in protecting women’s health, it ensures that there is “real substance to the woman’s liberty to determine whether to carry her pregnancy to full term.” Under Casey, “[u]nnecessary health regulations that have the purpose or effect of presenting a substantial obstacle to a woman seeking an abortion” are an impermissible “undue burden” on constitutionally-protected due process rights. The Texas requirements are unconstitutional because they have no medical benefit and present substantial obstacles to women seeking abortions.

The court of appeals erroneously put the district court’s findings aside on the ground that the undue-burden test did not permit analysis of whether the challenged requirements “actually further[ed] the State’s legitimate interests.” To determine whether an abortion regulation is unnecessary and whether it imposes an undue burden, a court must decide whether the regulation actually is warranted, which requires ascertaining whether any benefits attach to it. The court of appeals’ contrary rule would reduce this aspect of the undue-burden test to mere rational basis review—an approach that the Supreme Court has already rejected. If the balance this Court struck in Casey is to retain its vitality, the Texas restrictions here must be invalidated.

Click here to view full brief: The United States of America

The amicus brief, joined by 39 Members of the Senate and 124 Members of the U.S. House of Representatives, makes clear that permitting pretextual laws like HB 2 to take effect would allow states to thwart the mandates of Roe and Casey—which the Supreme Court stated unequivocally is the law of the United States—and would create a patchwork of rights across our country. These Members of Congress are standing up to ensure that the rights of all of their constituents are protected, including those who live in rural areas and who are economically disadvantaged. The brief sets forth that a woman’s right to decide whether to carry a pregnancy to term is settled law and our nation cannot allow that right to be eroded by onerous TRAP laws enacted under the pretense of promoting women’s health and safety. The brief further demonstrates that these TRAP laws are already making it more difficult for women to seek lawful medical services and to exercise their right to decide whether to carry a pregnancy to term. In short, HB 2, and similar statutes in other states, imposes an undue burden on the ability of women to exercise their right to decide whether to terminate a pregnancy. Such a burden violates our constitution’s guarantees of liberty and autonomy, and therefore HB 2’s requirements must be declared unconstitutional.
Amici are the States of New York, California, Connecticut, Delaware, Hawai‘i, Illinois, Iowa, Maryland, Maine, Massachusetts, Oregon, Vermont, Virginia, and Washington and the District of Columbia. Amici regulate health-care services, and are committed to advancing their interest in assuring the safety of all such services without creating unwarranted obstacles to a woman’s constitutionally protected right to access abortion services.

The States’ brief argues that when a State adopts a burdensome abortion regulation that purports to advance its interest in women’s health, it should be required to demonstrate that the regulation will actually advance that interest. Review under this standard allows States to regulate in the interest of health and safety, while safeguarding a woman’s right to access abortion services from unwarranted and burdensome infringements.

The States’ brief additionally argues that the availability of abortion services outside a State is irrelevant to the question whether a particular abortion regulation unduly burdens the right to access abortion services. The obligation to preserve the constitutional rights of persons within a State rests with that State individually and is unaffected by the choices of other States. A contrary rule would have serious consequences; it could limit the regulatory choices of neighboring States, create uncertainty about the ongoing constitutionality of a State’s law in light of changing circumstances in neighboring States, and strain the healthcare systems of those neighboring States.

Click here to view full brief: The States of New York, California, Connecticut, Delaware, Hawai‘i, Illinois, Iowa, Maine, Maryland, Massachusetts, Oregon, Vermont, Virginia, and Washington, and the District of Columbia
The City of New York leads a coalition of cities and local government leaders from across the United States that support women’s access to safe and legal abortion services. Their brief describes the consequences of upholding abortion regulations that drastically diminish women’s access to abortion services in the areas where they reside, and the hardships imposed when women are compelled to travel long distances to an ever-dwindling number of clinics in cities and metropolitan areas, often out-of-state, to exercise their constitutional right to reproductive freedom. They argue that allowing laws like HB 2 to spread unchecked would roll back women’s rights and return the nation to pre-\textit{Roe v. Wade} days, when safe and legal abortion options were only available to women who resided in the few states and cities where abortion services were available, or who had the resources to travel across state lines to obtain crucial services.

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<td><strong>Republican Majority for Choice and its National Chairs, Former Republican Members of Congress, and Current and Former Republican State Officeholders</strong> Press Contacts: Kellie Rose Ferguson</td>
<td>The brief filed by the Republican Majority for Choice and current and former Republican officeholders focuses on the importance of protecting fundamental rights guaranteed by the Constitution from unwarranted government intrusion. As Republicans, <em>amicis</em> value a circumscribed and minimally intrusive government, are dedicated to the protection of individual liberties, and are opposed to governmental infringement of those liberties. The Supreme Court has long protected individual liberties from government intrusion, guaranteeing to individuals the right to make deeply personal and significant decisions without unwarranted interference by the state. The right to choose whether to terminate a pregnancy is just such a decision, and for more than four decades has been a right protected by the Constitution. The challenged provisions of Texas House Bill 2 infringe upon that right on pretextual grounds. <em>Amici</em> argue that the curtailment of individual liberties on pretextual grounds is antithetical to our founding principles, to the firmly established law of this Court, and to the Republican philosophy that only through small, less intrusive government will individual rights be honored and preserved.</td>
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<td><a href="mailto:kferguson@gopchoice.org">kferguson@gopchoice.org</a> <a href="mailto:abend@maglaw.com">abend@maglaw.com</a></td>
<td>Click here to view full brief: Republican Majority for Choice and Its National Chairs, Former Republican Members of Congress, and Current and Former Republican State Officeholders</td>
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### Amici

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<td>Judson Memorial Church, Religious Coalition for Reproductive Choice, Catholics for Choice, Keshet, Jewish Social Policy Network, Just Texas: Faith Voices for Reproductive Justice, Methodist Federation for Social Action, National Council of Jewish Women, Presbyterian Feminist Agenda Network, Religious Institute, Society for Humanistic Judaism, Union for Reform Judaism, Central Conference of American Rabbis, Unitarian Universalist Women’s Federation, Western Methodist Justice Movement, Women’s League for Conservative Judaism, Workmen’s Circle, and More Than 1200 Individual Religious Leaders and Pastoral Counselors</td>
<td>A group of religious organizations and over 1,000 individual religious leaders filed an <em>amicus</em> brief arguing that a woman has a moral right to make her own decisions about her pregnancy in accordance with her faith and conscience, and each woman must have access to medical care necessary to exercise that right. The brief presents religious leaders’ work since before <em>Roe v. Wade</em> to ensure that women seeking abortions can find dignity and high quality medical care. This work demonstrated that socioeconomic barriers can be as challenging as legal barriers to medically sound abortions, and therefore any genuine effort to protect the health and wellbeing of women seeking abortion must aim to increase the accessibility and affordability of abortion care. HB 2’s requirements impose high costs and lengthy delays that make safe abortion services less accessible for all women, particularly those who are marginalized and in need. The brief warns that—unless struck down—these requirements will injure the health and dignity of countless women.</td>
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### Theologians and Ethicists

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<th>Theologians and Ethicists</th>
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<td>Amici are theologians, ethicists, and scholars of religion who come from various faith traditions but join together on this brief to argue that the Texas provisions at issue are unjust under theological principles, no matter one’s position on whether abortion is moral, or even whether abortion should be legal. Drawing from the writings of St. Thomas Aquinas and other important voices in theology, the brief explains that the provisions are an illegitimate exercise of state power because they are dishonest and pretextual in nature, and moreover are irrational to their stated goal of protecting patient safety. The laws also are unjust because they do not serve the common good, and moreover impose disproportionate financial, physical, emotional, and dignitary burdens on poor and marginalized women, running directly counter to religious teachings such as Catholicism’s preferential option for the poor. Finally, <em>amici</em> recognize that the world’s major religions represent a plurality of positions on the morality of abortion, and advocate that any attempt to overturn prevailing</td>
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Press Contact: Dr. Donna Schaper | donnaschaper@judson.org

Press Contact: Kelly Largey | Largey@fr.com
law in the face of this nation’s tradition of religious liberty should be made through frank, impassioned, and forthright debate, not surreptitiously under the cover of a pretextual law. Amici believe that unjust laws not only cause grave harm to the populace they govern, but also corrode public faith in government and civil order, as well as the legitimacy of law itself as an institution. Amici respectfully submit this brief in the interest of building and promoting a legal regime that is sound, moral, and truly just.

Click here to view full brief: Theologians and Ethicists
### Amici

**Health Economists**

Press Contact: Barbara Abulafia | babulafia@kvn.com

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**Summary**

*Amici* are a group of prominent economists who study the marketplace for health-care services. Economic research over the past quarter century has revealed that any meaningful analysis of regulation must include an evidence-based inquiry that carefully examines the costs and benefits of the regulation at issue. Absent such an inquiry, policymakers run the risk of enacting well-meaning regulations that produce more harm than good or, worse, enacting pre-textual regulation designed to accomplish an improper end. *Amici* urge reversal of the 5th Circuit's decision because it unduly limits district courts from considering empirical evidence necessary to evaluate the costs and benefits of a regulation—something necessary to determine whether the burdens a regulation imposes on the abortion right are undue.

Click here to view full brief: [Health Economists](#)

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**Historians**

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**Summary**

Sixteen prominent historians of the United States explain the Texas law follows a long line of prior laws instituted ostensibly to protect the health, safety, and/or interests of women that had the effect of restricting women’s rights and undermining their dignity as full citizens.

Such sex-based laws claiming to protect women have ancient roots in the common law doctrine of coverture, which subsumed a wife’s legal persona under that of her husband, ostensibly for her protection and benefit.

Subsequently, state legislatures passed sex-specific regulations said to protect women’s health and safety, ranging from exemptions from jury service to restrictions on women’s conditions of waged work.

Because these laws were typically based on gender stereotypes and had the effect of limiting women’s liberty and autonomy and treating women as inferior citizens, they have been struck down as unconstitutional sex discrimination. Thus, any new law that claims to protect women’s health and safety should be scrutinized carefully to assess whether its ostensibly protective function actually serves to deny liberty and equal citizenship to women.

Click here to view full brief: [Historians](#)
### Summary

*Amici,* which include libertarian organizations, journalists and physicians, have joined the Brief of Freedom and Individual Rights in Medicine to share their concern regarding unjustifiable health care regulations that put individual liberty and free market principles at risk. In the view of *amici,* the health and safety of women seeking abortions would be best served by a free market constricted by only evidence-based regulations, which promote medical practices that rely on sound scientific research. A free market provides consumers of medical care with an increased supply of high-quality, affordable services from which to choose, as competition promotes innovation. Unjustifiable regulations in the health care market decrease the quality and quantity of services available while increasing their price, thus restricting patients’ choices. In the context of abortion, unjustifiable regulations, such as the admitting-privileges requirement and the ambulatory-surgical center requirements of HB 2, not only distort the already over-regulated market for and circumscribe access to relevant services, they also undermine a woman’s ability to exercise her liberty and decision-making autonomy in making responsible health care decisions.

Click here to view full brief: Freedom and Individual Rights in Medicine (FIRM), Dr. Amesh Adalja, Dr. Paul Hsieh, Dr. Karen Salmieri, and Jacob Sullum

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### Ten Pennsylvania Abortion Care Providers

This brief by ten Pennsylvania abortion care providers explains that medically unjustified restrictions - such as the Texas requirements challenged here - undermine the ability of responsible, high-quality abortion providers to provide safe, legal care to women. Such restrictions shut down law-abiding, quality providers, and do not deter rogue providers who do not comply with laws. By closing down safe, responsible providers, the Texas regulations will decimate the existing network of skilled abortion providers who are well-positioned to serve as whistleblowers and who are the best defense against unprincipled and unsafe practitioners. Enjoining the Texas ambulatory surgical facility and admitting privilege requirements will foster women’s health and safety by permitting responsible providers to continue to offer high-quality abortion care to their patients.

Click here to view full brief: Ten Pennsylvania Abortion Care Providers

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### Experts in Health Policy

This brief, filed by the National Partnership for Women & Families and the nation’s leading health policy experts, provides critical context about the trajectory of the U.S. health care system. A diverse set of stakeholders, from health policy scholars and government leaders, to business leaders, physicians, hospitals, insurance companies, and patient advocates, are in substantial agreement that to deliver optimal health outcomes and be sustainable in the long...
run, the U.S. health care system must find ways to deliver high quality care to more people more efficiently. Numerous initiatives within the public and private sectors are underway to transform the way health care is paid for and delivered, to try to achieve the goals of expanding quality care while controlling costs. This brief explains that the Texas abortion restrictions are fundamentally out of step with the national drive toward making high quality care more accessible and less costly. As the national trend moves to shift care out of high-cost settings and to encourage patients to obtain, and practitioners to provide, high-quality medical care at more accessible and cost-effective sites, the Texas provisions restrict abortion services to fewer and unnecessarily expensive facilities, and reduce the number of physicians who may provide abortion services. By forcing care into unnecessarily high-cost settings, and layering medically unnecessary burdens on health care providers, the Texas restrictions cannot be reconciled with consensus efforts underway to strengthen the U.S. health care system and improve the quality and availability of health care. Ropes & Gray LLP served as outside counsel on the brief.

Click here to view full brief: Experts in Health Policy