

MYTHS TRUTHS

ABORTION AMENDMENT MYTHS & TRUTHS

MYTH

The abortion amendment only legalizes abortion up to viability.



The abortion amendment legalizes abortion beyond viability, without limit for virtually any reason under a broad physical and mental health exemption. The U.S. Supreme Court has stated a physician has broad discretion in making that determination and can include the woman's concerns about age, finances, stress, or just about anything.[1] In addition, Sec. 3 B-2 states that determining fetal viability can be, in part, "based on the particular facts of the case," effectively leaving it completely undefined and impossible to regulate.

MYTH

Late term abortions don't really happen.



More than 10,000 late-term abortions are done every year in the United States.[2] Peer-reviewed research shows "most late-term abortions are elective, done on healthy women with healthy fetuses." [3]

MYTH

Without the abortion amendment, women won't be able to get miscarriage care, ectopic pregnancy care, or contraception.



Miscarriage & ectopic pregnancy care, and contraception are all available now and will be in the future with or without this amendment. Arizona law specifically declares miscarriage & ectopic pregnancy care, and contraception are NOT abortions. ARS 36-2151 (1) states "Abortion does not include...contraception...the use of any means...to terminate an ectopic pregnancy or to remove a dead fetus.

MYTH

Women who experience complications after 15 weeks of pregnancy won't be able to get an abortion until her life is in danger.



Arizona law allows abortions after the 15-week limit in medical emergencies, not just when her life is in danger. A medical emergency is defined as a serious risk of substantial and irreversible impairment of a major bodily function.

MYTH

Abortion is a decision between a woman and her doctor.



The abortion amendment takes the doctor out of the doctor-patient relationship by removing the current doctor requirement. The words doctor or physician are not found in the amendment.

MYTH

Qualified healthcare professionals will provide abortions.



Section 3-A-2 of the amendment uses the term "treating health care professional," not "doctor" or "physician" when addressing abortion providers and who can sign off on late-term abortions. Under Arizona law (32-3201) a "health care professional" includes podiatrists, chiropractors, dentists, pharmacists, etc. This vague language opens the door to a minor girl getting the abortion pill from the school nurse without parents knowing.

MYTH

The amendment doesn't say a minor can get an abortion.



By using the term "every individual" in Section 3-A, instead of "adult," the amendment pertains to anyone of any age. A constitutional amendment supersedes the current state law that requires a minor's parent to consent or for a court order authorizing the abortion.

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MYTH

The amendment doesn't say it removes parental consent.

TRUTH

The amendment uses the term "every individual" in Section 3-A, instead of "adult." With no distinction between minor or adult, a court could not infer a distinction.

MYTH

The amendment does allow safety precautions to be enforced.

TRUTH

No law that interferes with an abortion can stand, regardless of the health and safety applications. Section 3-B(1) a & b requires any health or safety regulation to also ensure a girl or woman can get the abortion. If it restricts an abortion, even to protect the girl or woman, it would be struck down. Section 3 B(1) b states no law or policy can stand if it "infringe[s] on that individual's autonomous decision making."

MYTH

Providers will have to maintain standards of care.

TRUTH

Not if they "deny, restrict, or interfere" (Section 3-A(1)) with a girl or woman getting an abortion. Nothing can get in the way of an abortion under the amendment language. If clinics claim the required supervised post-procedure recovery rooms, ultrasounds to detect complications, emergency equipment and protocols, or any other health precaution is limiting their ability to provide abortions, it could be struck down, according to (Section 3- B 1 (b)) as "infringe[ing] on that individual's autonomous decision making.

MYTH

The amendment doesn't say taxpayers will have to pay for abortions.

TRUTH

Because the amendment creates a fundamental right to abortion, any restriction on a government health care insurance plan would be seen as interfering with a woman or girl's fundamental right. Government health care coverage of other maternal services would then require coverage for abortion as well. A law that restricts such coverage would be accused of violating A(1) and B(1) a & b of the amendment. The ACLU filed suit in Michigan to force taxpayer-funded abortion after that state passed a similar amendment. [4]

MYTH

The amendment doesn't protect sex abusers.

TRUTH

Yes it does. The amendment prohibits "penalize[ing] anyone for aiding or assisting" someone getting an abortion. A sex trafficker or abuser could take his victim to get an abortion so he can cover his sex crime. He could not be penalized for the cover up, and the girl's parents would not be notified.

[1] Doe v. Bolton, 410 U.S. 179 (1973)

[2] Guttmacher Institute, June 2024, Abortion in the United States, National Library of Medicine, April 9, 2019, Late-Term Abortion and Medical Necessity: A Failure of Science, James Studnicki <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6457018/>

[3] Sage Journals, April 2019, Late-Term Abortion and Medical Necessity: A Failure of Science, <https://journals.sagepub.com/doi/full/10.1177/2333392819841781>

[4] ACLU press release, June 27, 2024, <https://www.aclumich.org/en/press-releases/aclu-and-ywca-kalamazoo-file-lawsuit-challenging-constitutionality-michigans-ban>