



Abortion Access Glossary

Crisis Pregnancy Center: Commonly referred to as CPCs, crisis pregnancy centers are fake health clinics that exist to persuade individuals from having an abortion. CPCs are staffed mainly by volunteers (not medical professionals) and have a reputation for providing inaccurate healthcare information. There are over 4,000 CPCs in the United States, many of which are run by religious groups.

The EACH Act: This promotes the affordability of abortion care by eliminating federal coverage restrictions on abortion services. The EACH Woman Act (this) would ensure that an individual's access to abortion services is not dependent on their health insurance or income.

The Hyde Amendment: Three years after Roe v. Wade, Congress passed the Hyde Amendment which bars the use of federal health insurance for abortions unless in the instance of rape, incest, or if the pregnant individual's life is in danger. This provision disproportionately impacts low-income women, students, and women of color who depend on federal health insurance plans such as Medicaid, Indian Health Services, and TRICARE.

Intersectionality: People of all races, religions, sexual orientations, and gender identities and expressions have abortions. Bans and restrictions disproportionately impact communities that have survived systemic oppression and people who hold multiple marginalized identities.

Reproductive Health: This primarily focuses on reproductive healthcare services (i.e., abortion and birth control) for patients and clients with a focus on improving and expanding research and medical services.

Reproductive Justice: This refers to a human rights framework coined by Black leaders nearly 30 years ago. [SisterSong](#) defines it as "the human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities." When using the term reproductive justice, we must address how race, class, gender identity, immigration status, disability, location, and other levels of oppression impact our experiences.



Reproductive Rights: This analyzes the core issue as the lack of legal protection, laws, or enforcement of laws that protect the legal right to reproductive healthcare services (i.e., abortion and birth control).

Targeted regulation of abortion providers (a.k.a. TRAP laws): These laws are medically onerous regulations on abortion providers and clinics. Examples of TRAP laws include mandating that abortion providers have admitting privileges at a nearby hospital or that abortion facilities meet the same medical standards for ambulatory surgical centers.

Undue burden: This is the standard of judicial scrutiny applied to restrictions on abortion. To establish that regulation of abortion constitutes an "undue burden" and is therefore unconstitutional, plaintiffs must establish that the regulation places a substantial obstacle in the path of an individual seeking an abortion.

The Women's Health Protection Act (WHPA): This legislation assures the right to access abortion care, free from bans, obstacles, and medically unnecessary restrictions that are not required for similar health care services (i.e., TRAP laws).