Oregon Reinforces Reproductive Rights

> "Reproductive choice is not only a dire issue concerning the rights of women and all people who may become pregnant, but one of racial and economic justice. Limits on reproductive health services disproportionately impact Black, brown, and low-income communities, therefore upholding and perpetuating income inequality and white supremacy."
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> —Joint statement by LWVUS Board President Dr. Deborah Ann Turner and LWV of Texas President Grace Chimene

Four years after the U.S. Supreme Court's Dobbs decision overturned federal constitutional abortion rights, efforts to restrict—and even criminalize—access to reproductive health care continue across multiple fronts. Thirteen states have enacted total bans on abortion care, and 28 others ban abortion at terms from six weeks to the point of fetal viability. Curtailing the availability of medication abortion tops these current legal, legislative, and administrative strategies at state and national levels.

In contrast, Oregon is among the states to protect access to reproductive health care, the people who need those services, and the medical professionals who provide that care. The Institute for Women's Policy Research named Oregon as one of the top five states (along with New Jersey, California, Washington, and Connecticut) to safeguard reproductive rights. The Oregon state legislature adopted additional measures this year to keep pace with potential new challenges in this ever-shifting political arena.

LWV Position on Reproductive Rights

As the opening quote of this overview demonstrates, the League of Women Voters of the United States and state Leagues across the nation have intervened extensively in legislative debates and legal cases involving reproductive health care. For example, the LWVUS joined a letter to Congress seeking to remove from the federal budget the Weldon Amendment, which effectively aims to override state laws that require insurance companies and health care entities to provide abortion care. The League also joined comments to the Department of Veterans Affairs opposing a proposed rule to eliminate reproductive care for veterans and their families.

The League of Women Voters of Oregon released this summary of the basis for the League's support for reproductive rights:

> LWVOR uses several LWVUS positions relating to women in supporting and opposing specific legislative proposals, statewide initiatives and community activities. The positions include: The League of Women Voters of the United States believes in the individual liberties guaranteed by the Constitution of the United States. The League is convinced that rights now

protected by the Constitution should not be weakened or abridged. The League of Women Voters of the United States believes that public policy in a pluralistic society must affirm the constitutional right of privacy of the individual to make reproductive choices. The League supports "equal rights for all regardless of sex." The League further believes that governments at all levels share the responsibility to provide equality of opportunity for education, employment and housing for all persons regardless of race, color, gender, religion, national origin, age, sexual orientation or disability. The League supports programs and policies to prevent or reduce poverty and to promote self-sufficiency for individuals and families, including quality of health care, income assistance, housing and public transportation access.

The Battle over Reproductive Rights Rages on

Though an outright abortion ban at the national level seems unlikely, the Trump administration has sought to restrict access to reproductive care on multiple fronts across federal agencies. As just one example, the U.S. Department of Health and Human Services announced an investigation into 13 states, including Oregon, that require health insurance plans to cover abortion care, alleging that these state laws violate the Weldon Amendment's prohibition on requiring health care entities to cover abortions "contrary to conscience."

An alarming development is a growing call among abortion opponents to criminalize the exercise of reproductive rights. In June 2026, on the fourth anniversary of the Dobbs decision, more than 60 conservative and religious leaders across the country "signed a petition to remove the 'legal immunities' that have protected women who get abortions from prosecution," *The New York Times* reported. According to an analysis by the Guttmacher Institute, 17 states have introduced bills to grant fetuses or embryos "personhood" rights, which would lay the legal foundation for charging people who access a range of reproductive health services. A bill before the Tennessee legislature would allow the state to charge people who access abortion care with homicide. To date, none of these bills have been signed into law.

A major legal and legislative focus involves efforts to restrict access to medication abortions, which now account for nearly two-thirds of abortions today, according to the ACLU. In May 2026, the U.S. Supreme Court temporarily blocked a lower court's decision that the abortion pill mifepristone should only be dispensed in person—and not through telehealth appointments and mail delivery. That decision was in response to an appeal by two of the drug's manufacturers, with the support from 20 states, including Oregon. In an announcement following the Supreme Court ruling, Oregon Attorney General Dan Rayfield said access to reproductive health care via telehealth is especially crucial for people in remote rural areas.

Beyond that ongoing court case, legislators in states that have restricted reproductive rights introduced more than 80 bills seeking to reclassify medications used in abortions as highly controlled substances, which would limit access significantly.

Mifepristone gained FDA approval in 2000, and during the pandemic, the federal agency began allowing medications used to terminate pregnancies to be dispensed by mail. In a statement following the recent Supreme Court ruling, the Oregon Health Authority (OHA), noting that medication abortions accounted for 63 percent of the procedures performed here in 2024, issued this statement:

> OHA is committed to ensuring access to a full range of essential reproductive health services, including abortion. OHA wants to reassure patients and providers that mifepristone and abortion remain safe, legal and available in Oregon.

Reinforcing Oregon's Commitment to Reproductive Rights

In 2023, the Oregon State Legislature adopted HB2002, which protects access to reproductive and gender-affirming care, with this statement:

> Every individual has a fundamental right to make decisions about … the individual's reproductive health care, to use or refuse contraception, to continue the individual's pregnancy and give birth or to terminate the individual's pregnancy.

In the wake of the Dobbs decision, Oregon also enacted an interstate shield law that protects health care providers, patients, and people who help others access abortion care from the reach of out-of-state investigations, professional licensure consequences, adverse actions by insurance carriers, and the disclosure of information. The shield law was expanded in 2026 with HB4088, which adds more legal protections for state employees, midwives, and individuals seeking abortion or gender-affirming care.

The state provides public funding for abortion and requires private insurance plans to cover reproductive health care. In 2022, the state legislature appropriated $15 million to create the Reproductive Health Equity Fund to help cover travel expenses and lodging for people seeking abortions in Oregon.

Another state law enacted in 2026, HB4127, authorizes the use of state funds to backfill funding Planned Parenthood has lost since July 2025 when it was stripped of federal reimbursements through Medicaid or Medicare until June 30, 2026, with a contingency plan—the first in the nation—to continue to reimburse the health care provider should it lose access to Medicaid funding permanently. At the bill signing, Planned Parenthood officials noted that only 10 percent of the organization's services provided in Oregon are related to abortion; most involve birth control, vasectomies, treatment for sexually transmitted

infections, and screenings for breast and cervical cancer. The exception is its Ontario clinic in eastern Oregon, where most patients come from other states for abortion care.

As the four-year anniversary of the Dobbs decision approached in June 2026, Governor Tina Kotek reaffirmed Oregon's commitment to protecting citizens' reproductive rights with a visit to Planned Parenthood's Eugene-Springfield Health Center. "We continue to have the strongest protections for reproductive health care in the country, access to abortion and other services," Kotek said in that appearance.

Next Steps for Advocacy

The LWVUS offers these recommendations for League members and other citizens to stand up for continued access to reproductive health care:

- Support abortion seekers and providers directly.
- Vote for political candidates who support reproductive rights.
- Contact your representatives to reinforce the need for accessible, legal reproductive health services.
- Raise awareness about the critical importance of protecting reproductive rights by writing letters to the editor and providing testimony to legislative hearings.

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