

# Trump's (Second) First Year: New and Emerging Threats to Reproductive Rights



The Center for Reproductive Rights is a global legal advocacy organization dedicated to advancing reproductive freedom. We launched our [Repro Red Flags: Agency Watch](#) initiative on day one of the Trump administration to connect the dots between key anti-rights officials and the harmful policies they enact.

President Trump has continuously restricted reproductive rights and access both in the U.S. and across the world in the first year of his second administration. Through the flood of executive action, a few consistent themes have emerged. The administration is:

- 1. Removing nationwide protections for abortion:**
  - a. [Emergency Abortion Care Guidance](#)
  - b. [Safety from Health Center Violence](#)
  - c. [Data Privacy Rules](#)
- 2. Attacking abortion access in states where it is legal:**
  - a. [Veterans Health Care](#)
  - b. [Medicaid Health Coverage](#)
  - c. [Title X Family Planning Programs](#)
- 3. Sowing distrust in proven science to justify restricting abortion, birth control, and IVF:**
  - a. [Abortion Pill Safety](#)
  - b. [Abortion and Birth Control Differences](#)
  - c. [Effective Fertility Care](#)

We're highlighting the most harmful executive attacks on reproductive rights, the impact of these attacks on people's health, and what to expect in 2026. From cutting off access to abortion and contraception, to threatening patients and providers with unchecked violence and criminalization, let's be frank: your reproductive rights are in danger.

**“I know most Texas doctors are scared to provide abortions in any circumstances or even say the word abortion. We need clarity on what kinds of patients we can help without losing our license or ending up in jail.”**

**Dr. Damla Karsan**, Center plaintiff in *Zurawski v. Texas*

**“By pardoning FACE Act offenders, some who targeted my own clinic, President Trump has effectively given extremists permission to escalate their attacks against our health centers. The threats are relentless, the violence is real, and these terrorists will stop at nothing to block access to essential, life-saving abortion care.”**

**Renee Chelian**, Founder and CEO of Northland Family Planning Centers; Center client

# 1. Removing nationwide protections for abortion

The U.S. health care system is in crisis. But instead of supporting patients and providers, the administration is gutting the few protections they have.

## a. Emergency Abortion Care Guidance

The Trump administration dropped the government’s lawsuit seeking to protect emergency abortion care and withdrew its guidance on emergency abortion care. The government’s refusal to clarify federal emergency medical care laws makes doctors more hesitant to provide abortion care, even in dire situations.

Abortion bans have serious health consequences, notably for those who experience pregnancy complications. After Texas banned abortion, the rate of sepsis shot up more than 50% for women hospitalized when they lost their pregnancies in the second trimester, and the number of blood transfusions during emergency room visits for first-trimester miscarriage shot up by 54%.

## b. Safety from Health Center Violence

The Trump administration has stopped enforcing the Freedom of Access to Clinic Entrances (FACE) Act for reproductive health care. President Trump also pardoned 23 people convicted of violating the FACE Act. Several of those pardoned had physically blocked patients from entering a Michigan clinic represented by the Center for Reproductive Rights.

Since *Roe v. Wade* was overturned in 2022, there has been a sharp increase in violence against health centers, staff, and patients. In that year, there was a 538% increase in people obstructing clinic entrances, a 913% increase in stalking of clinic staff, and a 133% increase in bomb threats in states that protect abortion rights. Abortion hostility post-*Roe* has forced many of these health centers (more than 70) to close their doors.

## c. Data Privacy Rules

The Trump administration has scrubbed the Department of Health and Human Services (HHS) website of mentions of data privacy and nondiscrimination protections for reproductive health care. It also refused to defend the 2024 HIPAA Privacy Rule for Reproductive Health, which lessened the risk of pregnant patients being wrongly reported to law enforcement.

In the first two years after *Dobbs*, prosecutors brought at least 412 cases charging pregnant people with crimes related to pregnancy, pregnancy loss, or birth. Low-income individuals make up most of the people subjected to criminal proceedings arising from their pregnancies.

**Everyone deserves access to safe health care without fear of criminalization or violence.**

### **What’s Next? Misuse of the Comstock Act.**

The administration is positioned to misuse this 1873 “purity” law to investigate patients and target providers for jail time.

## 2. Attacking abortion access in states where it is legal

Despite vowing to leave abortion [to the states](#), the administration has cut off abortion options in states that protect those rights. The results sweep beyond abortion, with huge impacts on pregnancy, primary care, and more.

### a. Veterans Health Care

The Department of Veterans Affairs (VA) [banned](#) all abortion counseling and care at VA facilities, including in instances of rape, incest, or health emergencies, with only a narrow lifesaving exception. The new rule is one of the strictest abortion bans in the country as it applies to all VA health centers across the US, even in the 14 states with constitutional protections for abortion. As the rule was still pending, the Department of Justice (DOJ) wrote a [legal opinion](#) disavowing all abortion care for veterans. Instead of following the formal regulatory process, VA relied on the opinion to quietly announce in an [internal memo](#) that the new policy went into effect immediately.

In addition to eliminating one of the only abortion access points for veterans in states that are hostile to abortion, this rule significantly impacts states that protect reproductive rights—the [364,800 women veterans](#) who live in states that support abortion access, constituting 51% of all women veterans of reproductive age, are now unable to get previously available abortion care at their local, in-state VA facility.

### b. Medicaid Health Coverage

President Trump signed the One Big Beautiful Bill Act into law, eliminating health coverage for at least [10 million people](#). The law defunds essential community providers like Maine Family Planning and Planned Parenthood, adding [\\$52 million](#) to the federal budget deficit. The law also adds [mandatory work requirements and slashes state budgets](#) for reproductive health care, targeting states that expanded Medicaid coverage.

Since Trump signed the bill, nearly [1,000 primary care patients](#) in Maine have lost their care. Additionally, [20 Planned Parenthood health centers](#) have been forced to close, including in protective states like [California, New Jersey, and Ohio](#).

### c. Title X Family Planning Programs

The Trump administration froze [millions of dollars](#) for nearly [1 in 5 grantees](#) of Title X, the country's only federal program solely dedicated to funding birth control and related reproductive health services. The administration also [announced](#) plans to continue [targeting health centers](#) like Maine Family Planning and Planned Parenthood through new Title X rules.

Attacks on Title X, combined with Medicaid cuts, are a one-two punch for many health centers. The previous Trump administration's Title X changes resulted in more than [1,000 health centers](#) withdrawing from the program and no Title X-funded health centers in six states, five of which protect abortion rights. Title X still has not recovered. In 2023 it served [a million fewer](#) clients than before the Trump administration regulations went into effect.

**Far from leaving reproductive rights to states, the current administration has cut off reproductive options nationwide, especially in states that protect abortion.**

#### **What's Next? More defunding.**

A new Title X rule will go out of its way to target abortion providers and supporters, and impose costly changes on all clinics that are able to remain in the program.

**“The Department of Veterans Affairs makes a promise to care for those who are so bold as to wear the uniform of this nation and for their families. But when my wife and I were faced with the impossible decision to end a deeply wanted pregnancy, we could not turn to VA for help due to the previous ban, despite living in a state that protected our rights. As we grieved a child we had already named and loved, we were forced to navigate the complexities of changing state laws and political attacks on the abortion care my wife needed—a health care reality that awaits many other veteran families now that this new proposal is finalized.”**

Lindsay Church, founder and Executive Director of Minority Veterans of America

**“Maine Family Planning serves patients in the most remote parts of the state, including those who are low-income and have no other place to turn for care. We are their only lifeline. Given the shortage of providers in our rural state, it is cruel and senseless for Congress and the Trump administration to punish Mainers by denying them access to care from trusted health providers like us, simply because we provide abortion care.”**

George Hill, Maine Family Planning President & CEO; Center client

### “[A] pretty desperate argument”

[Jack Vanden Heuvel](#), a molecular toxicologist at Pennsylvania State University, on using wastewater concerns to restrict the abortion pill.

Anti-abortion extremists have used misinformation in another attack on the abortion pill, by making false environmental impact claims. There is no scientific evidence that use of the abortion pill negatively affects water quality.

Robert F. Kennedy, HHS Secretary, has [major ties](#) to the anti-science community, having founded the country’s leading vaccine disinformation organization. Since taking office, he has [misstated basic biology](#) and promoted conspiracy theories about using [painkillers](#), [anti-depressants](#), and [vaccines](#) in pregnancy.

### Knowledge is power.

Visit <http://reproductiverights.org/regions/united-states> to learn more and sign up for newsletter updates.

## 3. Sowing distrust in proven science to justify restricting abortion, birth control, and IVF

Junk science proponents in the administration are falsely painting reproductive health care as dangerous, misleading, and ineffective, despite overwhelming scientific consensus to the contrary. These tactics lay the groundwork to further limit abortion pills and to put new restrictions on birth control and assisted reproductive technology (ART) like in vitro fertilization (IVF).

### a. Abortion Pill Safety

The Food and Drug Administration (FDA) is [re-evaluating abortion pill safety](#). Administration officials justify this using an unpublished policy paper from a far right think tank, instead of using the designated FDA tools and systems for identifying real drug safety concerns. The paper has been thoroughly [discredited](#) for its [many flaws](#).

Since 2000, over [7.5 million women](#) in the U.S. have safely used the abortion pill to end pregnancies, with 99% of them reporting no serious safety concerns. The abortion pill has become the cornerstone of U.S. abortion access, accounting for [at least 63%](#) of clinician-provided abortions.

### b. Abortion and Birth Control Differences

The Trump administration [announced](#) plans to destroy truckloads of birth control procured by the U.S. Agency for International Development (USAID), prior to its [dismantling](#), for distribution to low-income countries in Africa. The State Department falsely labelled the supplies as “[abortifacient birth control](#),” to justify refusing offers to purchase or redistribute them and to lay the groundwork for further restriction and stigmatization of contraception. There is [no such thing](#) as “abortifacient birth control.” By definition, birth control prevents pregnancy; it does not disrupt an existing pregnancy.

Although originally reported to be nearly [\\$10 million](#) worth of birth control, new reporting estimates that the supplies could be worth closer to [\\$40 million](#). Destruction of \$40 million of contraception could lead to nearly [1.5 million unintended pregnancies, 644,000 unplanned births, 440,000 unsafe abortions and 2,872 preventable maternal deaths](#).

### c. Effective Fertility Care

President Trump’s nominee to be the next Surgeon General, [Casey Means](#), is a vocal proponent of the “[blame and shame](#)” fertility approach, which frames infertility as a personal failure. The White House also previewed a [1.5 million dollar](#) funding opportunity to promote “blame and shame” fertility. Called “restorative reproductive medicine” by its fans, this approach repackages the holistic care fertility doctors [already provide](#), but positions itself against IVF, rather than as complementary.

While “blame and shame” fertility focuses exclusively on female infertility, male-factor infertility [accounts for or contributes](#) to 20-40% of infertility diagnoses in heterosexual couples in the U.S. “Blame and shame” fertility also ignores single people and LGBTQ+ couples for whom IVF is a critical method of family building. Indeed, IVF is the most commonly used form of ART, and in 2023 accounted for over [95,000 births](#) in the country.

**The science is clear: abortion pills, birth control, and IVF are all safe, effective, and commonly used. Reproductive health care should be available and accessible to all.**

### What’s Next? Abortion pill restrictions.

The FDA may add new barriers on its own or by court order.