



I Will Provide

I WILL PROVIDE: PLEDGE TO ADVOCATE

We are providers of compassionate reproductive health care. The people of our country trust us with their health, well-being, and reproductive futures. We serve as the bridge between our nation's families and the fundamental care they need, whether it's abortion, contraception, or preventive care.

Reproductive health care providers and patients are too often harmed in ways that providers and patients of other health care fields are not. Many of our incoming political leaders have supported policies that would curtail our ability to provide the full spectrum of comprehensive care for our patients. These measures will disproportionately affect low-income women, women of color, young women, immigrant women, and non-cisgender persons— communities that already suffer from health disparities and inequalities.



training. Some citizens have used arson, murder, and other illegal acts to target those of us who offer abortion care, and our patients. These acts threaten our well-being, and that of our patients and their families.

Despite these assaults, we vow to move forward. In light of the current political climate, we pledge to advocate for the following:

- 1. Respect for the patient-provider relationship.** Patients and their providers, not politicians, should decide together what type of contraception to use and whether to continue or end a pregnancy. Those decisions should never be constrained or coerced by the government.
- 2. Care without discrimination.** The ability to provide or obtain reproductive health care should not depend on a zip code, income, race, or source of insurance. Health care providers should be able to provide the care that is best for the patient's health. Those clinical conversations and/or outcomes should not be dictated or influenced primarily by cost barriers.
- 3. To give and receive care free from harm.** Performing a safe, legal medical procedure should not turn a medical professional or her/his patients into targets. Reproductive health care providers, and particularly abortion providers, their patients, their families, and their co-workers have the right to work free of violence, harassment, and discrimination.
- 4. Evidence-based care.** Reproductive health care providers have the professional obligation to give patients complete, medically accurate care. They should not be required by law to lie to their patients—for example, by stating (falsely) that abortions cause breast cancer or mental health problems—or present a particular moral interpretation of the abortion procedure.
- 5. Care when our patients need it.** A health care provider should be able to provide an abortion after explaining the procedure and obtaining the patient's consent. There is no medical reason for a patient to wait 24 hours, 72 hours, or any other length of time between consent and the abortion procedure as dictated by some

- 276. Robin Wallace, MD, MAS
- 277. Kari Braaten, MD, MPH
- 278. Erica Hinz, MD
- 279. Andrea Jochim, MD, PhD
- 280. Shandhini Raidoo, MD
- 281. Agatha Berger, MD
- 282. Jennefer Russo, MD
- 283. Shannon Carr, MD, MSc
- 284. Jennifer Conti, MD, MS
- 285. Lauren Naliboff, DO
- 286. Lauren Owens, MD
- 287. Caryn Dutton Bean, MD, MS
- 288. Sarita Sonalkar, MD, MPH
- 289. Elizabeth Deans, MD, MPH
- 290. Jennifer Robinson, MD, MPH
- 291. Paula Bednarek, MD, MPH
- 292. Matthew Reeves, MD, MPH
- 293. Ben Brown, MD
- 294. Chioma Ndubisi, MD
- 295. Sarah Averbach, MD
- 296. Laura Laursen, MD
- 297. Justine Wu, MD, MPH
- 298. Megan Lawley

