



## **Bodily Autonomy Matters!**

Last week, Ohio sent a decisive message to the legislators of that state and the rest of the country: bodily autonomy matters! Among other things, Issue 1 on the state ballot this year establishes “an individual right to one’s own reproductive medical treatment, including but not limited to abortion” in the state constitution. Given the relentless assaults on abortion care in Ohio over the past several years, this outcome was both surprising and immensely gratifying.

As my spouse and I observed the returns coming in, I was both encouraged by the early results and anxious for what the final result would be. Having lived through elections where early results were not indicative of the final outcome, I was leery of reading too much into what we were seeing. At one point, while he was checking social media, he said to me, “I am starting to hear people calling it.” I scoffed. “Who are these ‘people’ and why should I trust them?” Naturally, a few moments later, various news outlets began to indeed affirm what “people” had been saying, and two of my lawyer friends shared some celebratory texts. It was another hour before I would finally believe it was true.

The relief among my colleagues, co-conspirators, and friends has been immense. A week later, my friend Laura—a registered nurse and former director of nursing at a sexual health care clinic that offers abortion care—said to me, “I don’t even know what it would be like to work at a job where the state isn’t against us, and now I get to just have a normal job!”

Abortion providers care deeply about those who are pregnant and their families. They listen to their patients and help them discern what is right for them at that moment. They do not force people to have abortions against their will, and they do not encourage patients to make choices incongruent with their values. Sometimes, they provide care to families who deeply want to raise children and who are facing heartbreaking choices.

The new constitutional amendment places responsibility for individual

medical decisions in the hands of individuals and their medical care providers who know both the larger-scale scientific issues and the particular care needs of their individual patients. This is as it should be. And while the fight for bodily autonomy will continue—in Ohio and elsewhere—we can take heart in knowing that for now, Ohio is a place that trusts its people to make medical decisions in their own best interest.

### **ABOUT THE AUTHOR**

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