

Overview and Summary: Reproductive Justice

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Overview

Reproductive justice expands the traditional concepts of reproductive health and rights by focusing on how intersecting social, political, and economic factors influence the ability of individuals, particularly from marginalized communities, to make empowered reproductive choices ([Ross & Solinger, 2017](#)). Reproductive justice goes beyond traditional reproductive rights, focusing on the structural inequalities that hinder true reproductive freedom ([SisterSong, n.d.](#)). It calls for a holistic approach to healthcare and social policies that respect individuals' autonomy and address the disparities that have long affected marginalized groups in the U.S. ([Sutton et al., 2021](#)). The movement underscores the importance of reproductive freedom being tied to broader social and economic justice issues, requiring systemic changes to achieve equity.

From a nursing perspective, reproductive justice in the U.S. is deeply connected to the nursing ethos of holistic, equitable, and patient-centered care ([ANA, 2022](#)). Reproductive justice emphasizes the right to reproductive healthcare and the conditions necessary for individuals to exercise those rights in meaningful ways. Nurses are at the forefront of addressing healthcare disparities, and applying the principles of reproductive justice allows them to advocate for patients' rights across the entire spectrum of reproductive health—from contraception and abortion access to maternal health and postpartum care.

Nurses are key providers in ensuring equitable access to reproductive health services, especially for marginalized populations, such as women of color, LGBTQ+ individuals, and those with low socioeconomic status ([Valdez et al., 2023](#)). The profession has a long-standing commitment to addressing social determinants of health, such as poverty, housing instability, and lack of healthcare access, all of which are central to the reproductive justice framework. For example, nurses working in underserved communities often witness firsthand how these factors limit patients' reproductive choices, such as the inability to access contraception, prenatal care, or safe abortion services. By acknowledging these broader challenges, nurses can offer more comprehensive care that is clinically appropriate and sensitive to patients' life circumstances.

Additionally, the nursing profession plays a pivotal role in advocating for policies that address reproductive injustices. Nurses frequently encounter the direct impact of systemic racism and economic inequality on maternal and reproductive health outcomes ([Sutton et al., 2021](#)). Nurses operating within the reproductive justice framework recognize that marginalized populations often face structural barriers that impede their access to reproductive healthcare services ([Valdez et al., 2023](#)). These barriers include but are not limited to limited access to affordable healthcare, discrimination within the healthcare system, and higher rates of adverse health outcomes such as maternal morbidity and mortality ([Prather et al., 2016](#); [Sutton et al., 2021](#)). With our patient advocacy skills, nurses are uniquely qualified to push for systemic changes, such as improved maternal care protocols, increased funding for community health resources, and enhanced cultural competence training within healthcare systems.

Incorporating reproductive justice into nursing practice also means expanding the scope of care to consider not just the right to have or not have children, but the right to parent children in a safe, healthy environment. This aspect of reproductive justice requires nurses to engage in community outreach, education, and public health initiatives that support families ([Onwuachi-Saunders et al., 2019](#)). Whether working in public health, maternal-child health, or psychiatric nursing, nurses are called to advocate for policies such as paid family leave, access to affordable childcare, and protection against environmental hazards that disproportionately affect low-income and minority communities. The profession's core values of advocacy, compassion, and patient-centered care make nursing an essential ally in the fight for reproductive justice.

In conclusion, reproductive justice aligns closely with the profession's commitment to promoting health equity and social justice. Nurses provide direct care and advocate for systemic changes that address the root causes of reproductive health disparities. By integrating reproductive justice into practice, nurses contribute to creating a healthcare system where all individuals, regardless of background, can make autonomous reproductive choices and receive the care they need to

support those decisions.

Topic Articles:

[Reflections on Reproductive Justice in the United States from 1989 to 2024](#) by Katherine Simmonds discusses the history of reproductive justice (RJ) and the role of nurses in supporting vulnerable populations. She highlights how the term "Reproductive Justice" was coined in 1994 by Women of African Descent for Reproductive Justice. This group emerged in response to the U.S. reproductive rights movement, which white, wealthy women primarily led. Based on her three decades of nursing experience, Simmonds reflects on critical global issues and the importance of RJ principles in nursing. She concludes with an urgent call for nurses to take action in advancing these principles.

[Intersectionality and Feminist Theory: A Framework for Understanding and Teaching Social Construct and Healthcare Policy](#) by Erin J. Dy discusses the political and cultural assumptions that have shaped the current state of women in society and their impact on healthcare. She highlights the nursing shortage in the U.S., exacerbated by Baby Boomer retirements, creating a gap in leadership. This shortage is particularly critical as the country becomes more diverse, yet women and minorities remain underrepresented in leadership roles. The overturning of Roe v. Wade underscores the marginalization of women and people of color, which is rooted in systemic power imbalances. Dy advocates for using intersectionality theory to address power dynamics in healthcare and for nurse leaders to challenge these structures to influence healthcare policy.

[The Movement: Reproductive Health and Rights in 2024](#) by Versie Johnson-Mallard, Kim Curry, PhD, Alisha Lickwar, Rosa M. Gonzalez-Guarda, Elizabeth A. Kostas-Polston, Melva Thompson-Robinson, and Ivy M. Alexander discuss the salient issues surrounding reproductive health and justice in 2024. The article discusses women's sexual and reproductive health (SRH), covering topics like sexual expression, pregnancy, contraception, and reproductive system diseases. It emphasizes the role of legal authority, political influence, and legislation in regulating women's SRH in the U.S., while also noting the involvement of national and international organizations in SRH rights (SRHR) activities, such as policy development and monitoring. Key issues in SRHR include rights for the LGBTQ population, immigration, and reproductive health rights for marginalized groups. The article defines SRHR as an extension of human rights, focusing on autonomy, freedom from violence, and access to SRH resources. It also highlights the role of nurses in shaping research, practice, and policy related to SRH.

[An Overview of Abortion Laws for Nurses to Advocate for Themselves and Their Patients](#) by Kimberly Cleveland and Jackie L. Russell identifies how nurses can protect themselves and their patients regarding changing abortion laws in the United States. The impact of the Dobbs decision on abortion policy, nurses, health systems, and healthcare leaders is profound and complex. Understanding the history of abortion legislation and the impact of that legislation on nursing practice and licensure is vital if policy and law are to reflect the needs of society. This article provides a focused history of abortion policy and law, the current implications of the Dobbs' holding on the practice of nursing, and the future considerations for practice, policy, and nursing education that are presented by abortion regulation.

[Healthcare Needs of Incarcerated Pregnant and Postpartum Women: Implications for Just Nursing Practice](#) by Allison Flynn Becker explores the healthcare challenges faced by incarcerated women, emphasizing the need for nurses to advocate for better care for these women and their babies. Women in prison often have significant health issues and lack adequate healthcare access, especially regarding pregnancy, birth, and postpartum care. Prisons are frequently ill-equipped to address these gender-specific needs, with state policies varying widely. The article provides an overview of reproductive healthcare issues for incarcerated women, reviews relevant research, and highlights recommendations such as using birth doulas and prison nurseries. Becker advocates for nurses to adopt a trauma-informed care approach and engage in legislative efforts to improve healthcare outcomes for this vulnerable population.

[Reproductive Justice: A Framework for Improving Maternal Mental Health](#) by James K. Tudhope examines the maternal mental health crisis in the U.S. within the context of reproductive justice. The U.S. has the highest maternal death rate among high-income countries, with Black women being the most affected. Mental health conditions, particularly Perinatal Mood and Anxiety Disorders (PMAD), are the most common complications during pregnancy and the leading cause of pregnancy-related deaths. Tudhope advocates for nurses to adopt a Reproductive Justice framework to improve perinatal mental health outcomes. The article reviews the crisis and provides actionable steps nurses can take to foster better health for mothers and babies.

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