

Justice Stevens, concurring in part and dissenting in part.

The portions of the Court's opinion that I have joined are more important than those with which I disagree. I shall therefore first comment on significant areas of agreement, and then explain the limited character of my disagreement.

I

The Court is unquestionably correct in concluding that the doctrine of stare decisis has controlling significance in a case of this kind, notwithstanding an individual justice's concerns about the merits. The central holding of *Roe v. Wade*, 410 U. S. 113 (1973), has been a part of our law for almost two decades. *Planned Parenthood of Central Mo. v. Danforth*, 428 U. S. 52, 101 (1976) (Stevens, J., concurring in part and dissenting in part). It was a natural sequel to the protection of individual liberty established in *Griswold v. Connecticut*, 381 U. S. 479 (1965). See also *Carey v. Population Services Int'l*, 431 U. S. 678, 687, 702 (1977) (White, J., concurring in part and concurring in result). The societal costs of overruling *Roe* at this late date would be enormous. *Roe* is an integral part of a correct understanding of both the concept of liberty and the basic equality of men and women.

Stare decisis also provides a sufficient basis for my agreement with the joint opinion's reaffirmation of *Roe*'s post-viability analysis. Specifically, I accept the proposition that [i]f the State is interested in protecting fetal life after viability, it may go so far as to proscribe abortion during that period, except when it is necessary to preserve the life or health of the mother. 410 U. S., at 163-164; see ante, at 36-37.

I also accept what is implicit in the Court's analysis, namely, a reaffirmation of *Roe*'s explanation of why the State's obligation to protect the life or health of the mother must take precedence over any duty to the unborn. The Court in *Roe* carefully considered, and rejected, the State's argument that the fetus is a 'person' within the language and meaning of the Fourteenth Amendment. 410 U. S., at 156. After analyzing the usage of person in the Constitution, the Court concluded that that word has application only postnatally. *Id.*, at 157. Commenting on the contingent property interests of the unborn that are generally represented by guardians ad litem, the Court noted: Perfection of the interests involved, again, has generally been contingent upon live birth. In short, the unborn have never been recognized in the law as persons in the whole sense. *Id.*, at 162. Accordingly, an abortion is not the termination of life entitled to Fourteenth Amendment protection. *Id.*, at 159. From this holding, there was no dissent, see *id.*, at 173; indeed, no member of the Court has ever questioned this fundamental proposition. Thus, as a matter of federal constitutional law, a developing organism that is not yet a person does not have what is sometimes described as a right to life. This has been and, by the Court's holding today, remains a fundamental premise of our constitutional law governing reproductive autonomy.

II

My disagreement with the joint opinion begins with its understanding of the trimester framework established in *Roe*. Contrary to the suggestion of the joint opinion, ante, at 33, it is not a contradiction to recognize that the State may have a legitimate interest in potential human life

and, at the same time, to conclude that that interest does not justify the regulation of abortion before viability (although other interests, such as maternal health, may). The fact that the State's interest is legitimate does not tell us when, if ever, that interest outweighs the pregnant woman's interest in personal liberty. It is appropriate, therefore, to consider more carefully the nature of the interests at stake.

First, it is clear that, in order to be legitimate, the State's interest must be secular; consistent with the First Amendment the State may not promote a theological or sectarian interest. See *Thornburgh v. American College of Obstetricians and Gynecologists*, 476 U. S. 747, 778 (1986) (Stevens, J., concurring); see generally *Webster v. Reproductive Health Services*, 492 U. S. 490, 563-572 (1989) (Stevens, J., concurring in part and dissenting in part). Moreover, as discussed above, the state interest in potential human life is not an interest in loco parentis, for the fetus is not a person.

Identifying the State's interests "which the States rarely articulate with any precision" makes clear that the interest in protecting potential life is not grounded in the Constitution. It is, instead, an indirect interest supported by both humanitarian and pragmatic concerns. Many of our citizens believe that any abortion reflects an unacceptable disrespect for potential human life and that the performance of more than a million abortions each year is intolerable; many find third-trimester abortions performed when the fetus is approaching personhood particularly offensive. The State has a legitimate interest in minimizing such offense. The State may also have a broader interest in expanding the population, believing society would benefit from the services of additional productive citizens "or that the potential human lives might include the occasional Mozart or Curie." These are the kinds of concerns that comprise the State's interest in potential human life.

In counterpoise is the woman's constitutional interest in liberty. One aspect of this liberty is a right to bodily integrity, a right to control one's person. See e.g., *Rochin v. California*, 342 U.S. 165 (1952); *Skinner v. Oklahoma*, 316 U. S. 535 (1942). This right is neutral on the question of abortion: The Constitution would be equally offended by an absolute requirement that all women undergo abortions as by an absolute prohibition on abortions. Our whole constitutional heritage rebels at the thought of giving government the power to control men's minds. *Stanley v. Georgia*, 394 U. S. 557, 565 (1969). The same holds true for the power to control women's bodies.

/* *Stanley vs. Georgia* being the case in which the Supreme Court held that the private possession of obscene material (other than child pornography) by adults in the privacy of their homes, is legal. */

The woman's constitutional liberty interest also involves her freedom to decide matters of the highest privacy and the most personal nature. Cf. *Whalen v. Roe*, 409 U. S. 589, 598-600 (1977). A woman considering abortion faces a difficult choice having serious and personal consequences of major importance to her own future "perhaps to the salvation of her own immortal soul." *Thornburgh*, 476 U. S., at 781. The authority to make such traumatic and yet empowering decisions is an element of basic human dignity. As the joint opinion so eloquently demonstrates, a woman's decision to terminate her pregnancy is nothing less than a matter of

conscience.

Weighing the State's interest in potential life and the woman's liberty interest, I agree with the joint opinion that the State may 'expres[s] a preference for normal childbirth,' that the State may take steps to ensure that a woman's choice is thoughtful and informed, and that States are free to enact laws to provide a reasonable framework for a woman to make a decision that has such profound and lasting meaning. Ante, at 30. Serious questions arise, however, when a State attempts to persuade the woman to choose childbirth over abortion. Ante, at 36. Decisional autonomy must limit the State's power to inject into a woman's most personal deliberations its own views of what is best. The State may promote its preferences by funding childbirth, by creating and maintaining alternatives to abortion, and by espousing the virtues of family; but it must respect the individual's freedom to make such judgments.

This theme runs throughout our decisions concerning reproductive freedom. In general, Roe's requirement that restrictions on abortions before viability be justified by the State's interest in maternal health has prevented States from interjecting regulations designed to influence a woman's decision. Thus, we have upheld regulations of abortion that are not efforts to sway or direct a woman's choice but rather are efforts to enhance the deliberative quality of that decision or are neutral regulations on the health aspects of her decision. We have, for example, upheld regulations requiring written informed consent, see *Planned Parenthood of Central Mo. v. Danforth*, 428 U. S. 52 (1976); limited recordkeeping and reporting, see *ibid.*; and pathology reports, see *Planned Parenthood Assn. of Kansas City, Mo., Inc. v. Ashcroft*, 462 U. S. 476 (1983); as well as various licensing and qualification provisions, see e.g., *Roe*, 410 U. S., at 150; *Simopoulos v. Virginia*, 462 U. S. 506 (1983). Conversely, we have consistently rejected state efforts to prejudice a woman's choice, either by limiting the information available to her, see *Bigelow v. Virginia*, 421 U. S. 809 (1975), or by requir[ing] the delivery of information designed 'to influence the woman's informed choice between abortion or childbirth.' *Thornburgh*, 476 U. S., at 760; see also *Akron v. Akron Center for Reproductive Health, Inc.*, 462 U. S. 416, 442-449 (1983).

In my opinion, the principles established in this long line of cases and the wisdom reflected in Justice Powell's opinion for the Court in *Akron* (and followed by the Court just six years ago in *Thornburgh*) should govern our decision today. Under these principles, 3205(a)(2)(i)-(iii) of the Pennsylvania statute are unconstitutional. Those sections require a physician or counselor to provide the woman with a range of materials clearly designed to persuade her to choose not to undergo the abortion. While the State is free, pursuant to 3208 of the Pennsylvania law, to produce and disseminate such material, the State may not inject such information into the woman's deliberations just as she is weighing such an important choice.

Under this same analysis, 3205(a)(1)(i) and (iii) of the Pennsylvania statute are constitutional. Those sections, which require the physician to inform a woman of the nature and risks of the abortion procedure and the medical risks of carrying to term, are neutral requirements comparable to those imposed in other medical procedures. Those sections indicate no effort by the State to influence the woman's choice in any way. If anything, such requirements enhance, rather than skew, the woman's decisionmaking.

III

The 24-hour waiting period required by 3205- (a)(1)-(2) of the Pennsylvania statute raises even more serious concerns. Such a requirement arguably furthers the State's interests in two ways, neither of which is constitutionally permissible.

First, it may be argued that the 24-hour delay is justified by the mere fact that it is likely to reduce the number of abortions, thus furthering the State's interest in potential life. But such an argument would justify any form of coercion that placed an obstacle in the woman's path. The State cannot further its interests by simply wearing down the ability of the pregnant woman to exercise her constitutional right.

Second, it can more reasonably be argued that the 24-hour delay furthers the State's interest in ensuring that the woman's decision is informed and thoughtful. But there is no evidence that the mandated delay benefits women or that it is necessary to enable the physician to convey any relevant information to the patient. The mandatory delay thus appears to rest on outmoded and unacceptable assumptions about the decisionmaking capacity of women. While there are well-established and consistently maintained reasons for the State to view with skepticism the ability of minors to make decisions, see *Hodgson v. Minnesota*, 497 U. S. 417, 449 (1990), none of those reasons applies to an adult woman's decisionmaking ability. Just as we have left behind the belief that a woman must consult her husband before undertaking serious matters, see ante, at 54-57, so we must reject the notion that a woman is less capable of deciding matters of gravity. Cf. *Reed v. Reed*, 404 U. S. 71 (1971).

/* The Court here noting the insulting and condescending aspects of regulations designed to protect women from themselves. */

In the alternative, the delay requirement may be premised on the belief that the decision to terminate a pregnancy is presumptively wrong. This premise is illegitimate. Those who disagree vehemently about the legality and morality of abortion agree about one thing: The decision to terminate a pregnancy is profound and difficult. No person undertakes such a decision lightly, and States may not presume that a woman has failed to reflect adequately merely because her conclusion differs from the State's preference. A woman who has, in the privacy of her thoughts and conscience, weighed the options and made her decision cannot be forced to reconsider all, simply because the State believes she has come to the wrong conclusion.

Part of the constitutional liberty to choose is the equal dignity to which each of us is entitled. A woman who decides to terminate her pregnancy is entitled to the same respect as a woman who decides to carry the fetus to term. The mandatory waiting period denies women that equal respect.

IV

In my opinion, a correct application of the undue burden standard leads to the same conclusion concerning the constitutionality of these requirements. A state-imposed burden on the exercise of a constitutional right is measured both by its effects and by its character: A burden may be

undue either because the burden is too severe or because it lacks a legitimate, rational justification.

The 24-hour delay requirement fails both parts of this test. The findings of the District Court establish the severity of the burden that the 24-hour delay imposes on many pregnant women. Yet even in those cases in which the delay is not especially onerous, it is, in my opinion, undue because there is no evidence that such a delay serves a useful and legitimate purpose. As indicated above, there is no legitimate reason to require a woman who has agonized over her decision to leave the clinic or hospital and return again another day. While a general requirement that a physician notify her patients about the risks of a proposed medical procedure is appropriate, a rigid requirement that all patients wait 24 hours or (what is true in practice) much longer to evaluate the significance of information that is either common knowledge or irrelevant is an irrational and, therefore, undue burden.

The counseling provisions are similarly infirm. Whenever government commands private citizens to speak or to listen, careful review of the justification for that command is particularly appropriate. In this case, the Pennsylvania statute directs that counselors provide women seeking abortions with information concerning alternatives to abortion, the availability of medical assistance benefits, and the possibility of child- support payments. 3205(a)(2)(i)-(iii). The statute requires that this information be given to all women seeking abortions, including those for whom such information is clearly useless, such as those who are married, those who have undergone the procedure in the past and are fully aware of the options, and those who are fully convinced that abortion is their only reasonable option. Moreover, the statute requires physicians to inform all of their patients of the probable gestational age of the unborn child. 3205(a)(1)(ii). This information is of little decisional value in most cases, because 90% of all abortions are performed during the first trimester when fetal age has less relevance than when the fetus nears viability. Nor can the information required by the statute be justified as relevant to any philosophic or social argument, ante, at 30, either favoring or disfavoring the abortion decision in a particular case. In light of all of these facts, I conclude that the information requirements in 3205(a)(1)(ii) and 3205(a)(2)(i)-(iii) do not serve a useful purpose and thus constitute an unnecessary "and therefore undue" burden on the woman's constitutional liberty to decide to terminate her pregnancy.

Accordingly, while I disagree with Parts IV, V-B, and V-D of the joint opinion, I join the remainder of the Court's opinion.

Justice Blackmun, concurring in part, concurring in the judgment in part, and dissenting in part.

I join parts I, II, III, V-A, V-C, and VI of the joint opinion of Justices O'Connor, Kennedy, and Souter, ante.

Three years ago, in *Webster v. Reproductive Health Serv.*, 492 U. S. 490 (1989), four Members of this Court appeared poised to cas[t] into darkness the hopes and visions of every woman in this country who had come to believe that the Constitution guaranteed her the right to reproductive choice. *Id.*, at 557 (Blackmun, J., dissenting). See *id.*, at 499 (opinion of Rehnquist, C.J.); *id.*, at 532 (opinion of Scalia, J.). All that remained between the promise of *Roe* and the darkness of the plurality was a single, flickering flame. Decisions since *Webster*

gave little reason to hope that this flame would cast much light. See, e.g., *Ohio v. Akron Center for Reproductive Health*, 497 U. S. 502, 524 (1990) (opinion of Blackmun, J.). But now, just when so many expected the darkness to fall, the flame has grown bright.

I do not underestimate the significance of today's joint opinion. Yet I remain steadfast in my belief that the right to reproductive choice is entitled to the full protection afforded by this Court before *Webster*. And I fear for the darkness as four Justices anxiously await the single vote necessary to extinguish the light.

I

Make no mistake, the joint opinion of Justices O'Connor, Kennedy, and Souter is an act of personal courage and constitutional principle. In contrast to previous decisions in which Justices O'Connor and Kennedy postponed reconsideration of *Roe v. Wade*, 410 U. S. 113 (1973), the authors of the joint opinion today join Justice Stevens and me in concluding that the essential holding of *Roe* should be retained and once again reaffirmed. Ante, at 3. In brief, five Members of this Court today recognize that the Constitution protects a woman's right to terminate her pregnancy in its early stages. *Id.*, at 1.

A fervent view of individual liberty and the force of *stare decisis* have led the Court to this conclusion. Ante, at 11. Today a majority reaffirms that the Due Process Clause of the Fourteenth Amendment establishes a realm of personal liberty which the government may not enter, ante, at 5 "a realm whose outer limits cannot be determined by interpretations of the Constitution that focus only on the specific practices of States at the time the Fourteenth Amendment was adopted. See ante, at 6. Included within this realm of liberty is 'the right of the individual, married or single, to be free from unwarranted governmental intrusion into matters so fundamentally affecting a person as the decision whether to bear or beget a child.'" Ante, at 9, quoting *Eisenstadt v. Baird*, 405 U. S. 438, 453 (1972) (emphasis in original). These matters, involving the most intimate and personal choices a person may make in a lifetime, choices central to personal dignity and autonomy, are central to the liberty protected by the Fourteenth Amendment. Ante, at 9 (emphasis added). Finally, the Court today recognizes that in the case of abortion, the liberty of the woman is at stake in a sense unique to the human condition and so unique to the law. The mother who carries a child to full term is subject to anxieties, to physical constraints, to pain that only she must bear. Ante, at 10.

The Court's reaffirmation of *Roe*'s central holding is also based on the force of *stare decisis*. [N]o erosion of principle going to liberty or personal autonomy has left *Roe*'s central holding a doctrinal remnant; *Roe* portends no developments at odds with other precedent for the analysis of personal liberty; and no changes of fact have rendered viability more or less appropriate as the point at which the balance of interests tips. Ante, at 18. Indeed, the Court acknowledges that *Roe*'s limitation on state power could not be removed without serious inequity to those who have relied upon it or significant damage to the stability of the society governed by the rule in question. Ante, at 13. In the 19 years since *Roe* was decided, that case has shaped more than reproductive planning" an entire generation has come of age free to assume *Roe*'s concept of liberty in defining the capacity of women to act in society and to make reproductive decisions. Ante, at 18. The Court understands that, having call[ed] the contending sides . . . to end their national division by accepting a common mandate rooted in the Constitution, ante, at 24, a

decision to overrule Roe would seriously weaken the Court's capacity to exercise the judicial power and to function as the Supreme Court of a Nation dedicated to the rule of law. Ante, at 22. What has happened today should serve as a model for future Justices and a warning to all who have tried to turn this Court into yet another political branch.

In striking down the Pennsylvania statute's spousal notification requirement, the Court has established a framework for evaluating abortion regulations that responds to the social context of women facing issues of reproductive choice. In determining the burden imposed by the challenged regulation, the Court inquires whether the regulation's purpose or effect is to place a substantial obstacle in the path of a woman seeking an abortion before the fetus attains viability. Ante, at 35 (emphasis added). The Court reaffirms: The proper focus of constitutional inquiry is the group for whom the law is a restriction, not the group for whom the law is irrelevant. Ante, at 53-54. Looking at this group, the Court inquires, based on expert testimony, empirical studies, and common sense, whether in a large fraction of the cases in which [the restriction] is relevant, it will operate as a substantial obstacle to a woman's choice to undergo an abortion. Id., at 54. A statute with this purpose is invalid because the means chosen by the State to further the interest in potential life must be calculated to inform the woman's free choice, not hinder it. Ante, at 35. And in applying its test, the Court remains sensitive to the unique role of women in the decision-making process. Whatever may have been the practice when the Fourteenth Amendment was adopted, the Court observes, [w]omen do not lose their constitutionally protected liberty when they marry. The Constitution protects all individuals, male or female, married or unmarried, from the abuse of governmental power, even where that power is employed for the supposed benefit of a member of the individual's family. Ante, at 57-58.

Lastly, while I believe that the joint opinion errs in failing to invalidate the other regulations, I am pleased that the joint opinion has not ruled out the possibility that these regulations may be shown to impose an unconstitutional burden. The joint opinion makes clear that its specific holdings are based on the insufficiency of the record before it. See, e.g., id., at 43. I am confident that in the future evidence will be produced to show that in a large fraction of the cases in which [these regulations are] relevant, [they] will operate as a substantial obstacle to a woman's choice to undergo an abortion. Ante, at 54.

/* An invitation for the court to later reconsider these matters. */

II

Today, no less than yesterday, the Constitution and decisions of this Court require that a State's abortion restrictions be subjected to the strictest of judicial scrutiny. Our precedents and the joint opinion's principles require us to subject all non-de minimis abortion regulations to strict scrutiny. Under this standard, the Pennsylvania statute's provisions requiring content-based counseling, a 24-hour delay, informed parental consent, and reporting of abortion-related information must be invalidated.

A

The Court today reaffirms the long recognized rights of privacy and bodily integrity. As early as 1891, the Court held, [n]o right is held more sacred, or is more carefully guarded by the

commonlaw, than the right of every individual to the possession and control of his own person, free from all restraint or interference of others *Union Pacific R. Co. v. Botsford*, 141 U. S. 250, 251 (1891). Throughout this century, this Court also has held that the fundamental right of privacy protects citizens against governmental intrusion in such intimate family matters as procreation, childrearing, marriage, and contraceptive choice. See ante, at 5-6. These cases embody the principle that personal decisions that profoundly affect bodily integrity, identity, and destiny should be largely beyond the reach of government. *Eisenstadt*, 405 U.S., at 453. In *Roe v. Wade*, this Court correctly applied these principles to a woman's right to choose abortion.

State restrictions on abortion violate a woman's right of privacy in two ways. First, compelled continuation of a pregnancy infringes upon a woman's right to bodily integrity by imposing substantial physical intrusions and significant risks of physical harm. During pregnancy, women experience dramatic physical changes and a wide range of health consequences. Labor and delivery pose additional health risks and physical demands. In short, restrictive abortion laws force women to endure physical invasions far more substantial than those this Court has held to violate the constitutional principle of bodily integrity in other contexts. See, e.g., *Winston v. Lee*, 470 U.S. 753 (1985) (invalidating surgical removal of bullet from murder suspect); *Rochin v. California*, 342 U.S. 165 (1952) (invalidating stomach-pumping).

Further, when the State restricts a woman's right to terminate her pregnancy, it deprives a woman of the right to make her own decision about reproduction and family planning "critical life choices" that this Court long has deemed central to the right to privacy. The decision to terminate or continue a pregnancy has no less an impact on a woman's life than decisions about contraception or marriage. 410 U.S., at 153. Because motherhood has a dramatic impact on a woman's educational prospects, employment opportunities, and self-determination, restrictive abortion laws deprive her of basic control over her life. For these reasons, the decision whether or not to beget or bear a child lies at the very heart of this cluster of constitutionally protected choices. *Carey v. Population Services, Int'l*, 431 U.S. 678 (1977).

A State's restrictions on a woman's right to terminate her pregnancy also implicate constitutional guarantees of gender equality. State restrictions on abortion compel women to continue pregnancies they otherwise might terminate. By restricting the right to terminate pregnancies, the State conscripts women's bodies into its service, forcing women to continue their pregnancies, suffer the pains of childbirth, and in most instances, provide years of maternal care. The State does not compensate women for their services; instead, it assumes that they owe this duty as a matter of course. This assumption "that women can simply be forced to accept the natural status and incidents of motherhood" appears to rest upon a conception of women's role that has triggered the protection of the Equal Protection Clause. See, e.g., *Mississippi Univ. for Women v. Hogan*, 458 U. S. 718, 724-726 (1982); *Craig v. Boren*, 429 U. S. 190, 198-199 (1976). The joint opinion recognizes that these assumptions about women's place in society are no longer consistent with our understanding of the family, the individual, or the Constitution. Ante, at 55.

B

The Court has held that limitations on the right of privacy are permissible only if they survive strict constitutional scrutiny "that is, only if the governmental entity imposing the restriction can

demonstrate that the limitation is both necessary and narrowly tailored to serve a compelling governmental interest." *Griswold v. Connecticut*, 381 U.S. 479, 485 (1965). We have applied this principle specifically in the context of abortion regulations. *Roe v. Wade*, 410 U. S., at 155.

Roe implemented these principles through a framework that was designed to insure that the woman's right to choose not become so subordinate to the State's interest in promoting fetal life that her choice exists in theory but not in fact, ante, at 30. *Roe* identified two relevant State interests: an interest in preserving and protecting the health of the pregnant woman and an interest in protecting the potentiality of human life. 410 U. S., at 162. With respect to the State's interest in the health of the mother, the 'compelling' point . . . is at approximately the end of the first trimester, because it is at that point that the mortality rate in abortion approaches that in childbirth. *Roe*, 410 U. S., at 163. With respect to the State's interest in potential life, the 'compelling' point is at viability, because it is at that point that the fetus presumably has the capability of meaningful life outside the mother's womb. *Ibid.* In order to fulfill the requirement of narrow tailoring, the State is obligated to make a reasonable effort to limit the effect of its regulations to the period in the trimester during which its health interest will be furthered. *Akron*, 462 U. S., at 434.

In my view, application of this analytical framework is no less warranted than when it was approved by seven Members of this Court in *Roe*. Strict scrutiny of state limitations on reproductive choice still offers the most secure protection of the woman's right to make her own reproductive decisions, free from state coercion. No majority of this Court has ever agreed upon an alternative approach. The factual premises of the trimester framework have not been undermined, see *Webster*, 492 U.S., at 553 (Blackmun, J., dissenting), and the *Roe* framework is far more administrable, and far less manipulable, than the undue burden standard adopted by the joint opinion.

Nonetheless, three criticisms of the trimester framework continue to be uttered. First, the trimester framework is attacked because its key elements do not appear in the text of the Constitution. My response to this attack remains the same as it was in *Webster*:

Were this a true concern, we would have to abandon most of our constitutional jurisprudence. [T]he 'critical elements' of countless constitutional doctrines nowhere appear in the Constitution's text The Constitution makes no mention, for example, of the First Amendment's 'actual malice' standard for proving certain libels, see *New York Times Co. v. Sullivan*, 376 U.S. 254 (1964). . . .

Similarly, the Constitution makes no mention of the rational-basis test, or the specific verbal formulations of intermediate and strict scrutiny by which this Court evaluates claims under the Equal Protection Clause. The reason is simple. Like the *Roe* framework, these tests or standards are not, and do not purport to be, rights protected by the Constitution. Rather, they are judge-made methods for evaluating and measuring the strength and scope of constitutional rights or for balancing the constitutional rights of individuals against the competing interests of government. 492 U.S., at 548.

The second criticism is that the framework more closely resembles a regulatory code than a body

of constitutional doctrine. Again, my answer remains the same as in Webster.

[I]f this were a true and genuine concern, we would have to abandon vast areas of our constitutional jurisprudence. . . . Are [the distinctions entailed in the trimester framework] any finer, or more 'regulatory,' than the distinctions we have often drawn in our First Amendment jurisprudence, where, for example, we have held that a 'release time' program permitting public-school students to leave school grounds during school hours receive religious instruction does not violate the Establishment Clause, even though a release-time program permitting religious instruction on school grounds does violate the Clause? Compare *Zorach v. Clauson*, 343 U.S. 306 (1952), with *Illinois ex rel. McCollum v. Board of Education of School Dist. No. 71, Champaign County*, 333 U.S. 203 (1948). . . . Similarly, in a Sixth Amendment case, the Court held that although an overnight ban on attorney-client communication violated the constitutionally guaranteed right to counsel, *Geders v. United States*, 425 U.S. 80 (1976), that right was not violated when a trial judge separated a defendant from his lawyer during a 15-minute recess after the defendant's direct testimony. *Perry v. Leake*, 488 U.S. 272 (1989). That numerous constitutional doctrines result in narrow differentiations between similar circumstances does not mean that this Court has abandoned adjudication in favor of regulation. *Id.*, at 549-550.

The final, and more genuine, criticism of the trimester framework is that it fails to find the State's interest in potential human life compelling throughout pregnancy. No member of this Court "nor for that matter, the Solicitor General, Tr. of Oral Arg. 42" has ever questioned our holding in *Roe* that an abortion is not the termination of life entitled to Fourteenth Amendment protection. 410 U.S., at 159. Accordingly, a State's interest in protecting fetal life is not grounded in the Constitution. Nor, consistent with our Establishment Clause, can it be a theological or sectarian interest. See *Thornburgh*, 476 U.S., at 778 (Stevens, J., concurring). It is, instead, a legitimate interest grounded in humanitarian or pragmatic concerns. See *ante*, at 4-5 (opinion of Stevens, J.).

But while a State has legitimate interests from the outset of the pregnancy in protecting the health of the woman and the life of the fetus that may become a child, *ante*, at 4, legitimate interests are not enough. To overcome the burden of strict scrutiny, the interests must be compelling. The question then is how best to accommodate the State's interest in potential human life with the constitutional liberties of pregnant women.

Again, I stand by the views I expressed in Webster: I remain convinced, as six other Members of this Court 16 years ago were convinced, that the *Roe* framework, and the viability standard in particular, fairly, sensibly, and effectively functions to safeguard the constitutional liberties of pregnant women while recognizing and accommodating the State's interest in potential human life. The viability line reflects the biological facts and truths of fetal development; it marks that threshold moment prior to which a fetus cannot survive separate from the woman and cannot reasonably and objectively be regarded as a subject of rights or interests distinct from, or paramount to, those of the pregnant woman. At the same time, the viability standard takes account of the undeniable fact that as the fetus evolves into its postnatal form, and as it loses its dependence on the uterine environment, the State's interest in the fetus' potential human life, and in fostering a regard for human life in general, becomes compelling. As a practical matter, because viability follows 'quickening'"the point at which a woman feels movement in her womb"and because viability occurs no earlier than 23 weeks gestational age, it establishes an

easily applicable standard for regulating abortion while providing a pregnant woman ample time to exercise her fundamental right with her responsible physician to terminate her pregnancy. 492 U.S., at 553-554.

Roe's trimester framework does not ignore the State's interest in prenatal life. Like Justice Stevens, I agree that the State may take steps to ensure that a woman's choice is thoughtful and informed, ante, at 29, and that States are free to enact laws to provide a reasonable framework for a woman to make a decision that has such profound and lasting meaning. Ante, at 30. But [s]erious questions arise when a State attempts to 'persuade the woman to choose childbirth over abortion.' Ante, at 36. Decisional autonomy must limit the State's power to inject into a woman's most personal deliberations its own views of what is best. The State may promote its preferences by funding childbirth, by creating and maintaining alternatives to abortion, and by espousing the virtues of family, but it must respect the individual's freedom to make such judgments. Ante, at 6 (opinion of Stevens, J.). As the joint opinion recognizes, the means chosen by the State to further the interest in potential life must be calculated to inform the woman's free choice, not hinder it. Ante, at 35.

In sum, Roe's requirement of strict scrutiny as implemented through a trimester framework should not be disturbed. No other approach has gained a majority, and no other is more protective of the woman's fundamental right. Lastly, no other approach properly accommodates the woman's constitutional right with the State's legitimate interests.

C

Application of the strict scrutiny standard results in the invalidation of all the challenged provisions. Indeed, as this Court has invalidated virtually identical provisions in prior cases, stare decisis requires that we again strike them down.

This Court has upheld informed and written consent requirements only where the State has demonstrated that they genuinely further important health-related state concerns. See *Danforth*, 428 U. S., at 65-67. A State may not, under the guise of securing informed consent, require the delivery of information 'designed to influence the woman's informed choice between abortion or childbirth.' *Thornburgh v. American College of Obstetricians & Gynecologists*, 476 U. S. 747, 760 (1986), (quoting *Akron*, 462 U. S., at 443-444). Rigid requirements that a specific body of information be imparted to a woman in all cases, regardless of the needs of the patient, improperly intrude upon the discretion of the pregnant woman's physician and thereby impose an 'undesired and uncomfortable straitjacket.' *Thornburgh*, 476 U. S., at 762 (quoting *Danforth*, 428 U.S., at 67, n. 8).

Measured against these principles, some aspects of the Pennsylvania informed-consent scheme are unconstitutional. While it is unobjectionable for the Commonwealth to require that the patient be informed of the nature of the procedure, the health risks of the abortion and of childbirth, and the probable gestational age of the unborn child, compare 3205(a)(i)-(iii) with *Akron*, 462 U. S., at 446, n. 37, I remain unconvinced that there is a vital state need for insisting that the information be provided by a physician rather than a counselor. *Id.*, at 448. The District Court found that the physician-only requirement necessarily would increase costs to the plaintiff-clinics, costs that undoubtedly would be passed on to patients. And because trained women

counselors are often more understanding than physicians, and generally have more time to spend with patients, see App. 366a-387a, the physician-only disclosure requirement is not narrowly tailored to serve the Commonwealth's interest in protecting maternal health.

Sections 3205(a)(2)(i)-(iii) of the Act further requires that the physician or a qualified non-physician inform the woman that printed materials are available from the Commonwealth that describe the fetus and provide information about medical assistance for childbirth, information about child support from the father, and a list of agencies offering that provide adoption and other services as alternatives to abortion. Thornburgh invalidated biased patient-counseling requirements virtually identical to the one at issue here. What we said of those requirements fully applies in this case:

the listing of agencies in the printed Pennsylvania form presents serious problems; it contains names of agencies that well may be out of step with the needs of the particular woman and thus places the physician in an awkward position and infringes upon his or her professional responsibilities. Forcing the physician or counselor to present the materials and the list to the woman makes him or her in effect an agent of the State in treating the woman and places his or her imprimatur upon both the materials and the list. All this is, or comes close to being, state medicine imposed upon the woman, not the professional medical guidance she seeks, and it officially structures "as it obviously was intended to do" the dialogue between the woman and her physician.

The requirements . . . that the woman be advised that medical assistance benefits may be available, and that the father is responsible for financial assistance in the support of the child similarly are poorly disguised elements of discouragement for the abortion decision. Much of this . . ., for many patients, would be irrelevant and inappropriate. For a patient with a life-threatening pregnancy, the 'information' in its very rendition may be cruel as well as destructive of the physician-patient relationship. As any experienced social worker or other counselor knows, theoretical financial responsibility often does not equate with fulfillment Under the guise of informed consent, the Act requires the dissemination of information that is not relevant to such consent, and, thus, it advances no legitimate state interest. 476 U. S., at 763.

This type of compelled information is the antithesis of informed consent, *id.*, at 764, and goes far beyond merely describing the general subject matter relevant to the woman's decision.

That the Commonwealth does not, and surely would not, compel similar disclosure of every possible peril of necessary surgery or of simple vaccination, reveals the anti-abortion character of the statute and its real purpose. *Ibid.*

The 24-hour waiting period following the provision of the foregoing information is also clearly unconstitutional. The District Court found that the mandatory 24-hour delay could lead to delays in excess of 24 hours, thus increasing health risks, and that it would require two visits to the abortion provider, thereby increasing travel time, exposure to further harassment, and financial cost.

Finally, the District Court found that the requirement would pose especially significant burdens on women living in rural areas and those women that have difficulty explaining their

whereabouts. App. to Pet. for Cert. in No. 91-902, pp. 380a-382a (hereinafter App.). In Akron this Court invalidated a similarly arbitrary or inflexible waiting period because, as here, it furthered no legitimate state interest.

As Justice Stevens insightfully concludes, the mandatory delay rests either on outmoded or unacceptable assumptions about the decisionmaking capacity of women or the belief that the decision to terminate the pregnancy is presumptively wrong. Ante, at 8. The requirement that women consider this obvious and slanted information for an additional 24 hours contained in these provisions will only influence the woman's decision in improper ways. The vast majority of women will know this information "of the few that do not, it is less likely that their minds will be changed by this information than it will be either by the realization that the State opposes their choice or the need once again to endure abuse and harassment on return to the clinic."

Except in the case of a medical emergency, 3206 requires a physician to obtain the informed consent of a parent or guardian before performing an abortion on an unemancipated minor or an incompetent woman. Based on evidence in the record, the District Court concluded that, in order to fulfill the informed-consent requirement, generally accepted medical principles would require an in-person visit by the parent to the facility. App. 399a. Although the Court has recognized that the State has somewhat broader authority to regulate the activities of children than of adults, the State nevertheless must demonstrate that there is a significant state interest in conditioning an abortion . . . that is not present in the case of an adult. Danforth, 428 U. S., at 74-75 (emphasis added). The requirement of an in-person visit would carry with it the risk of a delay of several days or possibly weeks, even where the parent is willing to consent. While the State has an interest in encouraging parental involvement in the minor's abortion decision, 3206 is not narrowly drawn to serve that interest.

Finally, the Pennsylvania statute requires every facility performing abortions to report its activities to the Commonwealth. Pennsylvania contends that this requirement is valid under Danforth, in which this Court held that recordkeeping and reporting requirements that are reasonably directed to the preservation of maternal health and that properly respect a patient's confidentiality are permissible. 428 U. S., at 79-81. The Commonwealth attempts to justify its required reports on the ground that the public has a right to know how its tax dollars are spent. A regulation designed to inform the public about public expenditures does not further the Commonwealth's interest in protecting maternal health. Accordingly, such a regulation cannot justify a legally significant burden on a woman's right to obtain an abortion.

The confidential reports concerning the identities and medical judgment of physicians involved in abortions at first glance may seem valid, given the State's interest in maternal health and enforcement of the Act. The District Court found, however, that, notwithstanding the confidentiality protections, many physicians, particularly those who have previously discontinued performing abortions because of harassment, would refuse to refer patients to abortion clinics if their names were to appear on these reports. App. 447a-448a. The Commonwealth has failed to show that the name of the referring physician either adds to the pool of scientific knowledge concerning abortion or is reasonably related to the Commonwealth's interest in maternal health. I therefore agree with the District Court's conclusion that the confidential reporting requirements are unconstitutional insofar as they require the name of the

referring physician and the basis for his or her medical judgment.

In sum, I would affirm the judgment in No. 91-902 and reverse the judgment in No. 91-744 and remand the cases for further proceedings.

III

At long last, The Chief Justice admits it. Gone are the contentions that the issue need not be (or has not been) considered. There, on the first page, for all to see, is what was expected: We believe that *Roe* was wrongly decided, and that it can and should be overruled consistently with our traditional approach to *stare decisis* in constitutional cases. *Post*, at 1. If there is much reason to applaud the advances made by the joint opinion today, there is far more to fear from The Chief Justice's opinion.

The Chief Justice's criticism of *Roe* follows from his stunted conception of individual liberty. While recognizing that the Due Process Clause protects more than simple physical liberty, he then goes on to construe this Court's personal liberty cases as establishing only a laundry list of particular rights, rather than a principled account of how these particular rights are grounded in a more general right of privacy. *Post*, at 9. This constricted view is reinforced by The Chief Justice's exclusive reliance on tradition as a source of fundamental rights. He argues that the record in favor of a right to abortion is no stronger than the record in *Michael H. v. Gerald D.*, 491 U. S. 110 (1989), where the plurality found no fundamental right to visitation privileges by an adulterous father, or in *Bowers v. Hardwick*, 478 U.S. 186 (1986), where the Court found no fundamental right to engage in homosexual sodomy, or in a case involving the firing of a gun . . . into another person's body. *Post*, at 9-10. In The Chief Justice's world, a woman considering whether to terminate a pregnancy is entitled to no more protection than adulterers, murderers, and so-called sexual deviates. Given The Chief Justice's exclusive reliance on tradition, people using contraceptives seem the next likely candidate for his list of outcasts. Even more shocking than The Chief Justice's cramped notion of individual liberty is his complete omission of any discussion of the effects that compelled childbirth and motherhood have on women's lives. The only expression of concern with women's health is purely instrumental "for The Chief Justice, only women's psychological health is a concern, and only to the extent that he assumes that every woman who decides to have an abortion does so without serious consideration of the moral implications of their decision." *Post*, at 25-26. In short, The Chief Justice's view of the State's compelling interest in maternal health has less to do with health than it does with compelling women to be maternal.

Nor does The Chief Justice give any serious consideration to the doctrine of *stare decisis*. For The Chief Justice, the facts that gave rise to *Roe* are surprisingly simple: women become pregnant, there is a point somewhere, depending on medical technology, where a fetus becomes viable, and women give birth to children. *Ante*, at 13. This characterization of the issue thus allows The Chief Justice quickly to discard the joint opinion's reliance argument by asserting that reproductive planning could take . . . virtually immediate account of a decision overruling *Roe*. *Id.*, at 14 (internal quotations omitted).