



Parallel Paths, Divergent Outcomes: A Comparative Analysis of Women's Bodily Autonomy in the Constitutional Frameworks of France and the United States

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Abstract

This paper examines the constitutional foundations of women's bodily autonomy in France and the United States, analyzing how two democracies with shared Enlightenment roots have produced sharply divergent outcomes in reproductive rights and gender equality. Drawing on socio-legal theory, international human rights law, and historical constitutional analysis, the study argues that differences in constitutional design, social contract traditions, and approaches to secularism have shaped each nation's treatment of women's reproductive freedom. Through a comparative analysis of legal texts, landmark judicial decisions, and policy developments, this research highlights how France's evolving constitutional framework has increasingly safeguarded bodily autonomy, while the United States has regressed toward restrictive, morally driven governance. The findings underscore the broader implications of constitutional adaptability and ethical governance for the protection of human rights in democratic societies.

Keywords: Bodily Autonomy, Reproductive Rights, Feminism, Constitutional Law, France, United States, Intersectionality, Secularism, Religious Conservatism, Gender Equality

1. Introduction

France and the United States, two nations often regarded as foundational pillars of modern democracy, share revolutionary origins that enshrined liberty, equality, and individual rights as

central tenets of their political identities (Loconte, 2021). Both nations emerged from violent uprisings against monarchic and colonial rule—the French Revolution (1789) being partially inspired by the American Revolution (1775–1783)—each proclaiming universal principles of human rights and democratic governance and enshrining it in their modern constitutional text (Office of the Historian). However, these shared ideals were not extended equally to all members of society. Women in both contexts were instrumental in supporting revolutionary causes but were systematically excluded from political participation and decision-making in the aftermath (Helton, 2003). The French Declaration of the Rights of Man and of the Citizen (1789) and the U.S. Declaration of Independence (1776) laid the groundwork for democratic societies while simultaneously neglecting the rights of women (France, 1789). Over time, both nations experienced waves of feminist movements, legal reforms, and social progress aimed at rectifying these initial exclusions.

Yet, despite their parallel origins and similar democratic foundations, the trajectories of France and the United States concerning women's bodily autonomy have diverged sharply. In March 2024, France became the first country to explicitly enshrine women's right to abortion and bodily autonomy in its constitution—a monumental achievement in safeguarding reproductive rights against political backlash (Bohlen, 2024). In contrast, the United States has witnessed a gradual erosion of reproductive rights, culminating in the 2022 Supreme Court decision in *Dobbs v. Jackson Women's Health Organization*, which overturned *Roe v. Wade* and removed federal protections for abortion access (*Dobbs v. Jackson Women's Health Organization*, 2022). This paper seeks to understand how two nations, born from similar democratic ideals, have arrived at such opposing outcomes regarding women's bodily autonomy.

This analysis focuses on five key elements: the historical and cultural foundations of democracy, the influence of religion and secularism, structural differences in governance, political polarization and judicial interpretation, and societal consensus. Together, these factors illuminate the structural and societal forces driving these divergent paths, and by examining these dimensions it will also illuminate the broader implications of these divergent paths for democracy, human rights, and gender equality globally. Ultimately, this comparative analysis will not only uncover the roots of these divergent outcomes but also offer insights into potential reforms in contexts where reproductive rights are under threat. Women's bodily autonomy serves as a barometer for the health of a democratic institution. In an era of democratic backsliding and rising authoritarianism, the preservation—or erosion—of reproductive rights couldn't carry more profoundly in the global sphere.

2. Historical Foundations of Democracy: France and the United States

The French Revolution (1789) and the American Revolution (1775–1783) represent two of the most significant political upheavals in modern history, laying the foundations for contemporary democratic governance. Both revolutions were driven by ideals of liberty and equality, yet their philosophical underpinnings and subsequent applications set them on distinct trajectories. The French Revolution, rooted in the principles of "Liberté, Égalité, Fraternité" (Liberty, Equality, Fraternity), sought to overthrow monarchical rule and create a universal framework of equality and justice (Bensel, 2022). The Declaration of the Rights of Man and of the Citizen (1789)

became a cornerstone document, asserting these universal rights and equality before the law (Olympe de Gouges, 1791). However, these rights were framed in gendered terms, with women explicitly excluded from political participation and citizenship, despite their significant contributions to revolutionary causes. Thus, the revolutionary focus on universal equality was paradoxically undermined by entrenched patriarchal norms.

The American Revolution championed the ideals of "Life, Liberty, and the Pursuit of Happiness," as articulated in the Declaration of Independence (1776). While the document emphasized individual freedoms and self-determination, these rights were primarily extended to white, landowning men, reflecting the exclusionary social and legal norms of the time (Bell-Romero, 2020). The U.S. Constitution (1787) codified these principles but remained silent on women's rights, embedding a patriarchal structure that required subsequent legal battles and amendments to address them (Norton, 1787). There were several key differences in their revolutionary ideals however. France's ideals were built on collective notions of equality and universal rights, whereas the United States emphasized individual freedoms and self-reliance as central to liberty (Rogoff, 1997). The French Revolution institutionalized secularism (*laïcité*) as a core value, reducing the influence of religious institutions on governance, in contrast, the American Revolution maintained an ambiguous relationship with religion, embedding principles of religious freedom while allowing Christian moral frameworks to persist in public discourse (Gunn, 2004).

France developed a highly centralized political system, allowing for national-level reforms to be implemented uniformly whereas the United States adopted a federal system, delegating significant legislative powers to individual states, creating room for regional disparities in policy implementation. While both revolutions sought to redefine governance based on human rights and democratic principles, their foundational documents failed to address gender equality explicitly. These exclusions laid the groundwork for centuries of feminist activism, legal reforms, and cultural shifts, shaping the modern-day battles over women's bodily autonomy in both nations. This historical divergence continues to echo in the constitutional, cultural, and legal landscapes of France and the United States, setting the stage for their contrasting approaches to reproductive rights today.

Women were key mobilizers and symbols of revolutionary zeal during the French Revolution (1789). They participated in landmark events such as the Women's March on Versailles (1789), where thousands of women demanded bread, economic relief, and accountability from the monarchy (Women and the Revolution). Influential figures such as Olympe de Gouges emerged as a vocal advocate for women's rights. Her seminal text, the "Declaration of the Rights of Woman and of the Female Citizen" (1791), challenged the gendered exclusions of the Declaration of the Rights of Man and of the Citizen and called for equal rights, access to education, and political participation. Despite these contributions, women were excluded from citizenship and political power.

The revolutionary government maintained that women's role was confined to the domestic sphere and reproductive responsibilities. Olympe de Gouges was ultimately executed in 1793, and her work dismissed, marking a violent backlash against early feminist advocacy (Spiegel, 2020). During the American Revolution (1775–1783), women supported the revolutionary cause through boycotts, organizing resources, serving as spies, and maintaining households in

the absence of male family members (Maier, 1997). Figures such as Abigail Adams advocated for women's inclusion in the new political order, famously urging her husband, John Adams, to "remember the ladies" when drafting laws. However, these calls for inclusion were largely ignored (Abigail Adams and 'Remembering the Ladies'). The U.S. Constitution (1787) made no mention of women's rights, and political participation remained limited to white, landowning men. The legal doctrine of coverture, inherited from British common law, rendered married women legally invisible, subsuming their identities and rights under their husbands, ultimately systematically excluding women from voting rights, political office, and legal autonomy, reinforcing patriarchal structures in the new American republic (Deering, 2024).

While women in both revolutions contributed to advancing democratic ideals, their exclusion from formal political participation reveals both parallels and key differences. Both revolutions confined women to the domestic sphere, viewing their primary roles as caretakers and moral guides rather than citizens with political agency. In France, exclusion was justified by framing citizenship through universalist yet implicitly male ideals, while in the United States, it was reinforced by legal doctrines like coverture and the emphasis on property ownership and male headship. Both nations responded harshly to women advocating for equality. In France, Olympe de Gouges faced execution, while in the U.S., women like Abigail Adams were dismissed and largely ignored.

These foundational exclusions set the stage for centuries of feminist advocacy in both nations. In France, subsequent feminist movements focused on national-level legislation while in the United States they relied heavily on judicial victories and constitutional amendments, leading to uneven progress across different states (Hurtig et al., 1989). The absence of explicit protections for women's rights in foundational documents left both nations vulnerable to political backsliding and ideological reinterpretations of women's autonomy in later centuries. These early exclusions were not merely oversights but deliberate structural choices that reinforced patriarchal norms and created long-lasting barriers to women's equality and bodily autonomy.

The relationship between state and religion has played a critical role in shaping the legal and cultural landscapes of reproductive rights in France and the United States. While both nations advocate for the separation of church and state, the application of this principle has diverged significantly, directly influencing policies on women's bodily autonomy. The French principle of *laïcité* (state secularism) emerged from the 1905 Law on the Separation of the Churches and the State, establishing a strict boundary between religion and governance (Boussinesq, 2000). This principle aimed to ensure neutrality of the state in religious matters, preventing religious institutions from influencing public policy. *Laïcité* limited the political power of religious organizations in debates surrounding bodily autonomy (Observatoire de la *Laïcité*).

In framing reproductive rights as individual freedom, rather than moral or religious, French policymakers have been able to pursue progressive reforms with broader public support. French society broadly supports *laïcité* as a cornerstone of democracy, allowing France to adopt consistent and centralized policies on reproductive rights, culminating in the 2024 constitutional amendment explicitly protecting women's bodily autonomy (France Becomes First Country to Guarantee a Constitutional Right to Abortion).

While the U.S. Constitution’s First Amendment prohibits the establishment of religion and guarantees religious freedom, religious values have remained deeply intertwined with American political and cultural life (First Amendment and Religion). The rise of Christian conservatism, particularly in the 1970s and 1980s, marked a turning point, with movements like the Moral Majority and evangelical groups mobilizing against abortion rights (Williams, 2010). Abortion has been framed in religious terms rather than as individual rights. Politicians often appeal to religious rhetoric to galvanize support or opposition on reproductive rights, embedding abortion access within a broader cultural war (Légier, 2023). The appointment of conservative judges to federal courts, including the Supreme Court, has been heavily influenced by religious and ideological considerations.

The 2022 Dobbs v. Jackson Women’s Health Organization decision, which overturned Roe v. Wade, reflects decades of organized efforts by religious conservative groups to influence judicial outcomes (Kaufman et al., 2022). In heavily religious states, particularly in the American South and Midwest, abortion restrictions have been framed as moral imperatives, while more secular-leaning states have maintained or expanded access to reproductive healthcare (Frohworth et al., 2019). Thus the pervasive influence of Christian conservatism has resulted in a fragmented legal landscape, where access to reproductive rights varies dramatically across states, leaving millions of women vulnerable to restrictive policies.

Table 1. Key Differences Between Laïcité and American Religious Influence

Aspect	France (Laïcité)	United States (Christian Conservatism)
State-Religion Relationship	Strict separation (1905 Law)	Ambiguous; freedom of religion but deep cultural entanglement
Framing of Reproductive Rights	Public health and personal freedom	Moral and religious issues
Institutional Influence	Limited religious influence on policy making	Strong religious influence in politics and judiciary
Policy Uniformity	National-level policy consistency	State-level variability and polarization
Public Perception	Broad societal consensus supporting secular governance	Deep cultural and regional divides

In France, the secular framing of reproductive rights has fostered political unity and societal consensus, reducing the ability of religious groups to derail policy advancements. In the United States, the moral framing of abortion has fueled partisan polarization, with reproductive rights becoming a central battleground in cultural and political debates. France’s approach demonstrates how secularism can insulate policy from ideological interference, while the U.S. highlights the risks of allowing religious conservatism to influence governance and judicial outcomes. The French model illustrates how secular principles can safeguard individual rights and maintain consistency in policy across a diverse population. The American case underscores how deep cultural and religious divisions can jeopardize fundamental rights and create inequitable access to healthcare and autonomy. While both France and the United States claim a commitment to separating church and state, their application of this principle has diverged significantly.

3. Women's Rights and Bodily Autonomy: Legal and Constitutional Pathways

France's journey toward women's rights and bodily autonomy reflects a long history of feminist advocacy, legal reforms, and political will, shaped by the country's unique cultural, legal, and secular foundations. While progress was often met with resistance, France's centralized governance structure ultimately facilitated national-level reforms that culminated in the 2024 constitutional amendment explicitly protecting women's bodily autonomy. After a lengthy uphill battle following the French Revolution, women gained voting rights in 1944, decades after many other Western democracies (Harper, 2024). With the global rise of authoritarianism, right-wing populism, and anti-feminist movements there was a sense of urgency created among French policymakers and advocacy groups. The overturning of *Roe v. Wade* in the United States (2022) served as a cautionary tale, demonstrating the fragility of rights without constitutional safeguards.

Within France, anti-abortion movements gained visibility, sparking concern over potential rollbacks (Goury-Laffont, 2024). Feminist organizations worked collaboratively to frame bodily autonomy as a fundamental human right. Public campaigns emphasized the importance of constitutionally enshrining abortion rights to prevent future governments from undermining them. French President Emmanuel Macron publicly endorsed the amendment, aligning with public sentiment and political momentum (Bottini et al., 2024). In March 2024, France became the first country in the world to enshrine women's right to abortion and bodily autonomy in its constitution. This historic move symbolized not only a national commitment to gender equality but also a global stand against rising threats to reproductive rights. France's historical trajectory toward women's bodily autonomy is a testament to the power of consistent advocacy, societal consensus and institutional design. The 2024 constitutional amendment represents not just a national milestone but also a global beacon of hope for reproductive rights. As the next section will show, the contrasting experience in the United States reveals how structural and cultural barriers can undermine even the most hard-won gains.

The trajectory of women's bodily autonomy and reproductive rights in the United States has been profoundly shaped by judicial decisions, political shifts, and state-level legislation. While the landmark *Roe v. Wade* decision in 1973 established a federal constitutional right to abortion, subsequent decades witnessed a gradual erosion of these protections through judicial reinterpretations, state-level restrictions, and ideological battles (Greenhouse & Siegel, 2019). The 2022 *Dobbs v. Jackson Women's Health Organization* decision marked a turning point, overturning *Roe* and returning abortion regulation to individual states, leading to a fragmented and unequal landscape of reproductive rights. In 1973, the U.S. Supreme Court ruled in *Roe v. Wade* that the right to privacy, derived from the 14th Amendment's Due Process Clause, extended to a woman's right to choose abortion (*Roe v. Wade* and Supreme Court Abortion Cases, 2022). The Court established a trimester framework: First Trimester: Abortion decisions were left to the woman and her physician. Second Trimester: States could impose regulations reasonably related to maternal health.

Third Trimester: States could restrict or ban abortion, except where necessary to protect the life

or health of the mother. Roe was celebrated as a landmark victory for reproductive rights and set a legal precedent protecting access to abortion at the federal level (Abortion, Roe v. Wade, and Pre-Dobbs Doctrine). In 1992, Planned Parenthood v. Casey reaffirmed the core principle of Roe v. Wade but replaced the trimester framework with the undue burden standard (Planned Parenthood of Southeastern Pa. v. Casey, 1992). The Court ruled that states could impose abortion restrictions as long as they did not place an "undue burden" on a woman seeking an abortion before fetal viability. This ruling gave states significant leeway to regulate abortion, leading to the rise of state-level restrictions such as: mandatory waiting periods, parental consent or notification laws, mandatory counseling before abortion. While Casey preserved abortion rights, it significantly weakened federal protections and opened the door for incremental restrictions at the state level (Totenberg, 2022). In 2022, the Supreme Court overturned Roe v. Wade and Planned Parenthood v. Casey in the Dobbs v. Jackson Women's Health Organization decision. The Court held that the U.S. Constitution does not confer a right to abortion, returning the issue to individual states to regulate or ban abortion as they see fit.

The Dobbs ruling marked the culmination of decades of conservative legal and political efforts to undermine Roe and restrict reproductive rights. In the aftermath of Dobbs over 20 states enacted near-total abortion bans or severe restrictions (Supreme Court Case: Dobbs v. Jackson Women's Health Organization). Abortion access became deeply polarized, with states like California and New York reinforcing protections, while others like Texas and Alabama implemented near-total bans (Nash & Guarnieri, 2023).

The ruling also raised broader concerns about the potential erosion of other privacy-related rights, including access to contraception and same-sex marriage. The federalist structure of the United States allows individual states to legislate on issues not explicitly defined in the Constitution, creating a patchwork legal landscape for abortion rights. Many conservative states passed "trigger laws" that would automatically ban abortion if Roe were overturned (Mayer et al., 2023). Some states passed laws banning abortion as early as six weeks into pregnancy, often before many women even realize they are pregnant. Abortion has become one of the most polarizing issues in American politics, with clear partisan divides. The judicial branch has become a critical battleground, with judicial appointments increasingly influenced by ideological and religious considerations (Bonica & Sen, 2021). Polls show that a majority of Americans support legal access to abortion, particularly in cases of rape, incest, or health risks to the mother. However, public opinion varies sharply by region and political affiliation, contributing to the state-level polarization of abortion policy (Cassese et al., 2025). Anti-abortion advocacy groups have leveraged misinformation campaigns and religious framing to build support for restrictive laws (Washington et al., 2024).

There are lots of broader consequences of eroded federal protections. Women in restrictive states face significant economic, geographic, and logistical barriers to accessing abortion services (Jerman et al., 2017). In some states, women seeking abortions and healthcare providers face legal prosecution and punitive measures. Many women are forced to cross state lines to access safe and legal abortion services, creating additional financial and emotional burdens (Forouzan et al., 2023). The reason Dobbs has raised concerns about future challenges to other privacy-based rights, including access to contraception and same-sex marriage. Relying on judicial rulings rather than constitutional enshrinement leaves rights vulnerable to

political shifts in court composition.

A federalist system leads to inconsistent access to healthcare and fundamental rights, with state-level politics creating significant disparities. In contrast to France, where reproductive rights have benefited from strong societal consensus, the politicization of these issues in the U.S. has deepened divisions, further obstructing progress and undermining the establishment of universal protections (Zeng, 2024). The contrasting outcomes of women’s bodily autonomy in France and the United States stem from fundamental differences. While both nations share revolutionary roots and democratic ideals, their approaches to enshrining, interpreting, and protecting reproductive rights reveal critical distinctions.

Table 2. Key Structural Differences: France vs. U.S.

Aspect	France	United States
Governance Model	Centralized, Unitary State	Federal, Decentralized State
Constitution Type	Codified Modern Framework	Rigid, Historical Document
Amendment Process	Achievable via parliament or referendum	Highly difficult, requiring broad consensus
Policy Implementation	Uniform, Nationwide	Fragmented, State-by-State
Reproductive Rights Framework	National Consensus	State-Level Variation

In France, the legislative branch serves as the central mechanism for advancing and safeguarding reproductive rights. Landmark legislation, such as the Veil Law of 1975, which legalized abortion, was enacted through Parliament with strong political leadership and widespread public support (Margolis, 2024). In 2024, reproductive rights were further solidified through a constitutional amendment, passed by Parliament and underpinned by broad societal consensus. France’s judiciary, particularly the Constitutional Council, plays a vital role in ensuring that legislation adheres to constitutional principles. However, unlike the U.S. Supreme Court, it does not serve as a political battleground. Instead, bodily autonomy in France has been secured primarily through legislative action and constitutional amendments, supported by public consensus and protected from the volatility of judicial reinterpretation.

In the United States, reproductive rights have historically been established—and subsequently dismantled—through judicial rulings rather than proactive legislative action. Landmark decisions such as *Roe v. Wade* (1973) and *Planned Parenthood v. Casey* (1992) framed abortion rights under the constitutional right to privacy, providing judicial protections. However, this reliance on the judiciary proved precarious, as demonstrated by the *Dobbs v. Jackson Women’s Health Organization* (2022) decision, which overturned *Roe* and shifted abortion regulation to state legislatures. Efforts to codify abortion rights at the federal level, such as the Women’s Health Protection Act, have repeatedly stalled due to partisan gridlock in Congress. As a result, reproductive rights in the U.S. remain heavily reliant on judicial interpretation and state-level legislation, leaving them highly susceptible to ideological shifts in judicial appointments and deepening political polarization.

Table 3. Key Judicial vs. Legislative Differences: France vs. U.S.

Aspect	France	United States
Primary Mechanism	Legislative and Constitutional Amendments	Judicial Precedent and State Laws
Judiciary's Role	Constitutional Oversight	Political Battleground
Legislative Dynamics	Strong national consensus	Deep partisan polarization
Policy Stability	Long-term stability via constitutional safeguards	Vulnerable to ideological shifts
Implementation of Rights	National and uniform	Fragmented, state-dependent

The contrast between France and the United States in safeguarding women's bodily autonomy highlights the pivotal influence of governance structures, constitutional frameworks, and societal values. France's success in legislating and enshrining reproductive rights in its constitution has ensured stability and nationwide protection. Conversely, the United States' dependence on judicial rulings and state-level governance has resulted in a fragmented and precarious system. This comparison underscores the necessity of robust institutional safeguards and decisive political leadership in upholding and protecting fundamental human rights.

4. Sociopolitical and Cultural Factors Shaping Policy Outcomes

The success of France in enshrining women's bodily autonomy into its constitution in 2024 can be attributed to a convergence of political will, progressive coalitions, and widespread societal support for gender equality and reproductive rights. These sociopolitical and cultural factors have worked in tandem to create an environment conducive to advancing and protecting women's rights at the national level. Political will, driven by committed leadership, cross-party coalitions, and feminist advocacy, has been a cornerstone of France's success in securing reproductive rights (Staff, 2024). Successive French governments have shown political courage in advancing these rights, beginning with the landmark Veil Law of 1975, which legalized abortion and established a framework for reproductive healthcare (Olszynko-Gryn & Rusterholz, 2019).

In 2024, President Emmanuel Macron and key parliamentary leaders prioritized constitutionalizing abortion rights, presenting it as a necessary safeguard against the growing global threats to reproductive freedoms. Despite political polarization in France, critical moments have seen support for reproductive rights transcend party lines. The 2024 constitutional amendment protecting abortion rights passed with a broad coalition of center-left, center-right, and progressive parties (Center for Reproduction Rights, 2024). This cross-party consensus reflected a shared recognition of abortion rights as fundamental to gender equality and democratic principles, transcending narrower political divisions.

Feminist advocacy played a vital role in achieving this outcome. Organizations like Le Planning Familial worked tirelessly to shape public discourse, framing abortion rights as a universal human rights issue rooted in equality, dignity, and healthcare access (Afkhani et al.,

2019). By moving the conversation away from political or moral debates, activists appealed to shared values that resonated across French society, maintaining pressure on political leaders to act decisively. The global rollback of reproductive rights, most notably the 2022 Dobbs decision in the United States, served as a stark warning for French policymakers. This cautionary example reinforced the urgency of preemptive action, motivating leaders to enshrine women's bodily autonomy into the French Constitution. Ultimately, the combination of strong political will, effective feminist advocacy, and cross-party collaboration created the conditions necessary to ensure long-term protection for reproductive rights in France. By embedding these rights into its Constitution, France has provided a model for safeguarding fundamental freedoms against future political shifts.

French society's widespread support for reproductive rights has been a cornerstone of the nation's progressive stance on bodily autonomy. Surveys consistently indicate that the majority of French citizens view access to abortion and reproductive healthcare as fundamental rights (Cohen, 2024). Unlike in some other nations, abortion is largely regarded as a personal and medical decision, rather than a moral or religious issue, reflecting a societal consensus rooted in principles of equality and individual freedom. Reproductive rights in France have been framed as both public health imperatives and fundamental human rights, shielding them from political and ideological manipulation.

The state has played a proactive role in normalizing these rights, investing in public education campaigns to destigmatize abortion and promote informed discussions around reproductive healthcare (Merchant, 2020). This approach has ensured that the conversation remains grounded in evidence and public health priorities. The principle of *laïcité*—France's commitment to state secularism—has further insulated public policy from religious influence. Religious arguments against abortion hold limited traction in both public and political spheres, as state policies are expected to remain neutral and secular (Culp, 2020). This foundation has allowed France to prioritize gender equality and public health over ideological debates. Over decades, France has witnessed a gradual cultural shift, fueled by feminist activism and public health advocacy, that has normalized women's bodily autonomy as an accepted societal norm.

The media has played a supportive role, fostering evidence-based discussions and steering public discourse toward themes of healthcare access and personal freedom, rather than moral or religious arguments (The 2018 National Consultation on Bioethics, 2018). With eighty percent of the French population being pro-choice, this strong societal consensus was thus respected by law makers and subsequently solidified as a non-negotiable freedom in France ('Eighty Percent' of French Want Abortion Rights Enshrined in Constitution, 2022). Public support has not only provided the political cover necessary to advance legal protections but also created the momentum for their continued defense and expansion. The relationship between political will and societal attitudes in France has been mutually reinforcing, creating a stable foundation for the protection of reproductive rights. Political leaders have been highly responsive to public sentiment, recognizing reproductive rights as a core societal value and prioritizing them in legislative and constitutional reforms. This alignment between public opinion and political action has fostered societal confidence in the ability of political institutions to safeguard fundamental rights. This follows the continued belief in The Social Contract, which is a heralded piece of French political theory, believing that "freedom is the

power to choose our own chains” (Rousseau, 1968). Time and time again we can see that the French government understands these dynamics and that they work for the people, not the other way around.

Unlike the deep polarization seen in the United States, French citizens generally trust their political institutions to act in the public’s best interest, further strengthening the bond between society and governance. In the most recent decades, trust has eroded between the governed and the government in the United States to work in their best interest, no longer feeling “assured that [the government] will govern for [their] profit, and not for their own” (Rousseau, 1968). The overturning of *Roe v. Wade* being against public consensus, with the current popular opinion being pro-choice at 63% (Pew Research Center, 2025). Public consensus in France however has proven to be a stabilizing force in protecting reproductive rights, acting as a safeguard against sudden political reversals. Broad societal support ensures that these rights are viewed as fundamental and non-negotiable, providing a strong foundation for legislative and constitutional protections. The principle of *laïcité* has played a critical role in insulating public policy from religious influence. By maintaining a clear separation between church and state, France has prevented religious arguments from dominating debates on reproductive rights, ensuring that policies are shaped by ethics not moral principles.

This unified approach contrasts sharply with the United States, where political polarization, religious influence, and decentralized governance have fostered a fragmented and unequal landscape for women’s bodily autonomy. The erosion of reproductive rights in the United States can be traced to two central sociopolitical and cultural dynamics: political polarization fueled by the rise of the Religious Right and the federalist system’s reliance on state sovereignty in governing issues not explicitly protected by the U.S. Constitution. Together, these forces have created a fragmented and deeply unequal landscape for women’s bodily autonomy across the country. The 1970s and 1980s marked a transformative period in American politics with the emergence of the Religious Right, a powerful coalition of evangelical Christians, conservative Catholics, and right-wing political groups. Organizations like the Moral Majority, founded in 1979, and the Christian Coalition became influential political forces, reframing abortion as a moral and religious issue and anchoring it to conservative political agendas (Himmelstein, 1989).

Politicians increasingly adopted religious rhetoric and anti-abortion messaging to galvanize conservative voter bases, solidifying opposition to abortion as a core element of the Republican Party’s identity (McKeegan, 1993). The *Roe v. Wade* (1973) decision sparked a moral backlash among conservative and religious groups, who saw the ruling as a direct challenge to traditional family values and religious beliefs. Abortion quickly became a litmus test for conservative political candidates, shaping campaigns and voter mobilization at local, state, and federal levels (Greenhouse & Siegel, 2011). Republican lawmakers prioritized the appointment of conservative judges to federal courts, particularly the Supreme Court, as a long-term strategy to challenge abortion rights (Singh et al., 2019).

This concerted effort culminated in the 2022 *Dobbs v. Jackson Women’s Health Organization* decision, which revealed public opinion on abortion in the United States was deeply divided, despite national polling consistently showing the majority support for abortion rights. This support is unevenly distributed across political, geographic, and cultural lines. Democrats

generally advocate for abortion access as a matter of healthcare and personal freedom, while Republicans, heavily influenced by evangelical and conservative Catholic factions, frame abortion as a moral and religious issue (Lipka, 2022). These stark divisions have stymied efforts to pass federal legislation codifying abortion rights, even when public opinion leans toward protections.

Conservative media and advocacy groups have played a significant role in shaping the abortion debate, spreading misinformation and framing the issue as a violent act against unborn children. Anti-abortion movements often rely on emotionally charged imagery and language, further deepening polarization (Media Literacy: How Disinformation About Abortion Spread in a Post-Roe America, 2022). Meanwhile, pro-choice advocates face challenges in overcoming cultural and religious stigmas in conservative regions, leaving gaps in public understanding of reproductive healthcare. As a result, abortion has become entrenched as a partisan and religious flashpoint, transforming it into a symbolic cultural battleground. This polarization has eroded opportunities for nuanced policy discussions and rendered meaningful compromise nearly impossible. The federalist system of governance in the United States grants individual states substantial authority to legislate on issues not explicitly addressed in the Constitution. While intended to balance power between federal and state governments, this system has led to significant regional disparities in reproductive rights, particularly following the 2022 *Dobbs v. Jackson Women's Health Organization* decision (National Constitution Center, 2022).

Access to abortion care in the United States has become starkly unequal, creating a two-tiered healthcare system defined by geographic and economic disparities. In progressive states, protections for reproductive rights have been expanded, with financial assistance and comprehensive healthcare services readily available. In conservative states, near-total bans, the criminalization of providers, and significant logistical barriers have severely restricted access (Fuentes, 2023). Women living in restrictive states are often forced to travel across state lines to obtain abortion care, facing substantial financial, emotional, and logistical challenges. These burdens fall disproportionately on marginalized groups, including low-income women and women of color, who are most affected by the compounded barriers to access (University of Pennsylvania, 2022). This growing inequality underscores the systemic inequities perpetuated by the fragmented U.S. healthcare and legal framework.

In conservative states, judicial challenges to restrictive abortion laws have largely been unsuccessful, hindered by the appointment of conservative judges at both state and federal levels. Conversely, in progressive states, reproductive rights have been safeguarded through proactive legislative measures by state governments. At the federal level, efforts to codify abortion rights into law, such as the Women's Health Protection Act, have repeatedly failed due to persistent partisan gridlock in Congress (Shivaram, 2022). As a result, the federalist system, coupled with deep partisan divides and judicial influence, has created a fragmented reproductive rights landscape. A woman's ability to access abortion care now depends heavily on her geographic location and socioeconomic status, and "no one is equal until we are all equal" (Nyamayaro, 2021).

The absence of a national consensus, combined with the reliance on state-level governance, has entrenched abortion as a deeply polarizing and politically volatile issue. Women's rights often become collateral in broader cultural and ideological battles, further exacerbating the divide

and undermining efforts toward equitable access nationwide. The federalist structure of governance in the United States has led to significant disparities in rights protections across states, creating a fragmented and unequal landscape. This issue is exacerbated by the fragility of judicial protections, as reliance on court rulings rather than constitutional guarantees leaves rights vulnerable to political and ideological shifts in the judiciary. Furthermore, deep political and cultural polarization hinders the formation of a broad national consensus, limiting the potential for stable and long-term policy solutions to address these disparities effectively. The concept of intersectionality, introduced by Kimberlé Crenshaw, highlights how overlapping systems of discrimination—including race, class, gender, and religion—interact to produce unique forms of inequality and marginalization (Crenshaw, 1991). In the context of women's bodily autonomy in France and the United States, these factors have played distinct yet significant roles in shaping policy outcomes, access to reproductive rights, and societal attitudes. In France, the intersection of race and reproductive rights policy reveals persistent disparities despite the country's emphasis on universalism and secularism (*laïcité*). This race-neutral policy framework often masks the specific challenges faced by marginalized communities, particularly immigrants from North African, Sub-Saharan African, and Middle Eastern backgrounds.

Structural barriers, including language differences, cultural stigmas, and economic insecurity, hinder these communities' access to reproductive healthcare. Stereotypes and stigmatization further exacerbate these inequities. Women from immigrant communities are frequently portrayed through cultural stereotypes, such as being "over-reproductive," which can influence healthcare providers' perceptions and treatment (Donnelly et al., 2023). Although France's centralized healthcare system guarantees equal legal access to abortion and reproductive services, these systemic barriers disproportionately affect immigrant women and women of color, limiting their practical ability to exercise these rights, revealing gaps between policy ideals and lived realities.

In the United States, race plays a central role in shaping reproductive healthcare inequalities, rooted in a history of racial discrimination. The legacy of forced sterilizations of Black, Latina, and Indigenous women in the 20th century underscores the systemic exploitation and control of marginalized communities' reproductive rights (Alonso). Today, abortion restrictions disproportionately affect these groups, who are more likely to live in poverty, lack access to healthcare, and encounter systemic barriers when seeking care (Kheyfets et al., 2023). Healthcare deserts further exacerbate these disparities. In states with strict abortion bans, rural areas and urban centers with large Black and Brown populations often lack adequate reproductive healthcare facilities, making access even more difficult (Wells et al., 2024). Additionally, the intersection of race and criminalization intensifies these inequities, as women of color are disproportionately targeted for prosecution under abortion bans and restrictive laws (Abrams, 2023). As a result, race remains deeply embedded in reproductive policy outcomes in the United States. Women of color disproportionately bear the burden of abortion restrictions and healthcare inequities, highlighting the systemic barriers that perpetuate racial and reproductive injustices (Sutton et al., 2021).

France's universal healthcare system provides state-funded access to abortion services, significantly reducing financial barriers for low-income women (Henshaw, 1994). However,

economic and geographic disparities remain. Women in rural areas often face longer travel distances and limited availability of clinics, creating challenges in accessing reproductive healthcare. For undocumented migrants, financial and administrative obstacles further hinder access to care. Although abortion procedures are covered by the state, hidden costs such as transportation, childcare, and time off work continue to pose barriers for economically disadvantaged women (Scheil-Adlung & Kuhl, 2011). While France’s universal healthcare model effectively minimizes direct financial obstacles to reproductive care, economic and geographic disparities persist, disproportionately impacting marginalized populations and revealing gaps in equitable access (Nay et al., 2016).

In the United States, class is a major determinant of access to reproductive healthcare, underscoring systemic inequalities in abortion access. The absence of universal healthcare leaves reproductive services tied to private insurance plans, creating significant financial barriers for uninsured or underinsured individuals (Dickman et al., 2017). Women in restrictive states face compounded challenges, including travel costs, childcare expenses, lost wages, and legal fees, when seeking abortion care out of state. The Hyde Amendment (1976) further entrenches these disparities by prohibiting federal funding for abortion services under Medicaid, disproportionately impacting low-income women who rely on state healthcare programs (Salganicoff et al., 2024). This lack of accessible care often perpetuates cycles of poverty, as unintended pregnancies can have long-term economic and social consequences for women and their families (Yazdkhasti et al., 2015). Ultimately, class profoundly shapes reproductive autonomy in the United States, with low-income women bearing the heaviest burden of financial, logistical, and legal barriers to accessing abortion care. These systemic obstacles highlight the deep inequities in the country’s fragmented healthcare system. Ultimately it's through the intersectionality of this and religious values that have clearly shaped legislative decisions.

Table 4. Intersectionality Across Both Contexts: Key Comparative Insights

Factor	France	United States
Race	Overlooked in a race-neutral system; immigrant communities face barriers	Structural racism entrenched in policy; women of color disproportionately affected.
Class	Universal healthcare minimizes financial barriers but geographic disparities persist.	Lack of universal healthcare; poverty exacerbates barriers to access
Religion	Limited political influence due to laïcité	Strong political influence of Christian conservatism

5. Contemporary Political Climate and Backlash

The contemporary political landscape reveals a global backlash against women’s rights, particularly targeting reproductive autonomy and gender equality. This backlash is not isolated but part of a broader trend fueled by rising authoritarianism, populist movements, and anti-feminist rhetoric (Bergsten et al., 2022). Both France and the United States have experienced these global pressures, albeit with differing outcomes, shaped by their unique political structures, cultural dynamics, and historical trajectories. Globally, authoritarian

leaders and right-wing populist movements have risen to prominence, frequently leveraging gendered and moral narratives to consolidate power (Adler et al., 2022). In countries like Poland, Hungary, Brazil, and Turkey, anti-abortion policies and anti-feminist rhetoric have become central to political platforms. These movements often frame feminism, LGBTQ+ rights, and reproductive autonomy as threats to traditional family values and national identity, using such narratives to galvanize support among conservative constituencies. The rollback of women's rights is frequently accompanied by broader attacks on democracy, judicial independence, and civil liberties (Roggeband & Krizsán, 2020). This alignment underscores how the erosion of reproductive autonomy is not only a gendered issue but also a symptom of wider authoritarian trends that seek to undermine inclusive and equitable governance. Women's bodies have become powerful symbols in nationalist and conservative political narratives, often positioned at the center of ideological battles (How Authoritarian Regimes Are Using Women's Bodies for Power).

Policies restricting abortion and reproductive healthcare are framed as measures to "protect the family" or "preserve national values." These narratives frequently intertwine with anti-immigration sentiments, portraying women's bodies as vessels for national reproduction and tools for demographic control, further entrenching patriarchal and exclusionary ideologies (Ishola et al., 2021). The rise of social media has amplified the reach of anti-feminist and anti-abortion movements, enabling the rapid spread of misinformation and fostering polarization (Di Fátima, 2024). These platforms have become critical tools for mobilizing support for restrictive policies, while simultaneously serving as arenas for harassment and intimidation (United Nations Educational, Scientific and Cultural Organization, 2023). Feminist activists and healthcare providers are often targeted through online abuse, creating a climate of fear designed to silence dissent and discourage advocacy for reproductive rights (Backlash). This digital landscape has become a significant battleground in the fight over women's autonomy and broader social progress.

While France has experienced the rise of anti-feminist and far-right populist sentiments, its political, cultural, and institutional frameworks have largely insulated reproductive rights from these pressures. Far-right groups, such as Rassemblement National (National Rally) led by Marine Le Pen, have gained political ground by leveraging anti-immigration, anti-LGBTQ+, and anti-feminist narratives (Bullens, 2024). However, abortion has not been a central focus of these movements, largely due to the widespread societal consensus on reproductive rights and the principle of *laïcité* (state secularism), which limits the influence of religious arguments in public policy (Boussineq, 2000).

The rise of right-wing populism and conservative Christian movements has fueled anti-abortion policies and reshaped public discourse. Politicians aligned with these movements have reframed abortion as a moral and religious issue, garnering strong support from rural and conservative regions (McCammon, 2022). The politicization of the U.S. judiciary, particularly through the appointment of conservative judges, has played a pivotal role in shaping reproductive rights. This culminated in landmark decisions such as *Dobbs v. Jackson Women's Health Organization* (2022), which overturned *Roe v. Wade*. Abortion rights have become a deeply partisan issue, with Democrats advocating for federal protections and Republicans championing state-level restrictions.

Table 5. Comparative Insights: France vs. United States

Factor	France	United States
Political Landscape	Unified, centralized governance	Fragmented federal structure
Societal Attitudes	Broad societal consensus on abortion	Deep cultural and regional divides
Religious Influence	Limited by laïcité	Dominant in conservative perspectives
Judiciary's Role	Primarily upholds constitutional principles	Highly politicized and influential
Legislative Action	Proactive constitutional amendment	Partisan gridlock at federal level

The global backlash against women's rights has manifested in both France and the United States. France's centralized governance, commitment to secular principles, and broad societal consensus have provided a robust defense against this backlash. In contrast, the United States' decentralized federal system, judicial vulnerability, and deep partisan divides have left reproductive rights highly susceptible to erosion. This comparison highlights the critical role of institutional design in protecting bodily autonomy against global anti-feminist trends. France demonstrates the power of aligning political will with societal values, while the U.S. underscores the risks of relying on judicial protections without constitutional safeguards.

6. Theoretical Implications

The protection—or erosion—of women's bodily autonomy is a critical indicator of the resilience and integrity of democratic institutions. Democracies are evaluated based on their ability to uphold individual rights, ensure equality before the law, and resist authoritarian tendencies (Brechenmacher et al., 2024). This section examines how bodily autonomy intersects with democratic resilience and argues that safeguarding reproductive rights is not merely a gender issue but a fundamental concern for democracy as a whole. Bodily autonomy—the right to make independent decisions about one's body free from coercion or external control—is a fundamental human right recognized in international legal frameworks, including the Universal Declaration of Human Rights (1948) and the Convention on the Elimination of All Forms of Discrimination Against Women (United Nations, 1979). In democratic societies, bodily autonomy acts as a litmus test for the principles of equality, freedom, and the rule of law, ensuring that individuals maintain control over their most personal decisions (United Nations Population Fund, 2023).

Reproductive rights, including access to abortion and reproductive healthcare, extend beyond healthcare—they encompass political agency, bodily sovereignty, and social equality. When democracies fail to protect reproductive rights, they expose weaknesses in their institutional frameworks, vulnerability to ideological manipulation, and an inability to safeguard marginalized and minority populations (Bouaziz, 2023). The rollback of reproductive rights often coincides with broader democratic backsliding, characterized by attacks on judicial independence, suppression of civil liberties, and the marginalization of minority groups

(Expanding Abortion Access Strengthens Democracy, While Abortion Bans Signal Broader Repression - Worldwide Study). A democracy's capacity to protect bodily autonomy reflects its commitment to core democratic principles, including individual freedom, gender equality, and protection from state overreach. Safeguarding reproductive rights is, therefore, not only a matter of human rights but a vital measure of democratic health and resilience.

France's decision to enshrine abortion rights in its constitution in 2024 reflects a proactive commitment to safeguarding democratic principles. This move protects reproductive rights from the vulnerabilities seen in other nations, such as the United States, where ideological shifts and majoritarian influences have eroded similar protections. By embedding bodily autonomy in constitutional law, France has demonstrated institutional resilience, ensuring that fundamental rights remain secure despite rising populism and authoritarian pressures. The principle of *laïcité* ensures that state policies remain free from religious influence, creating a neutral legal environment where decisions are driven by public health and human rights considerations rather than moral or religious ideologies. This commitment to secular governance prioritizes universal rights and national-level protections, reinforcing France's democratic institutions and insulating them from ideological capture. France's approach illustrates that embedding bodily autonomy in constitutional law serves as a robust democratic safeguard. This strategy protects fundamental rights against political and ideological shifts, ensuring the resilience and stability of democratic institutions in the face of global challenges.

The United States' reliance on judicial precedent, such as *Roe v. Wade*, rather than explicit constitutional protections, left reproductive rights vulnerable to ideological reinterpretations by the judiciary. The 2022 *Dobbs v. Jackson Women's Health Organization* decision overturned nearly five decades of precedent, exposing the fragility of rights reliant on judicial interpretation instead of constitutional enshrinement (Schneller et al., 2023). This ruling underscored the precariousness of reproductive rights in a highly politicized legal landscape. The U.S. federalist structure has created significant geographic disparities in reproductive rights, with women's bodily autonomy largely determined by state-level governance. This fragmentation undermines the principle of equal protection under the law, a cornerstone of democratic governance.

The rollback of abortion rights reflects broader democratic vulnerabilities, including heightened political polarization, judicial politicization, and the erosion of institutional checks and balances (Eckart, 2022). The erosion of reproductive rights has been accompanied by troubling developments such as increased state surveillance, the criminalization of healthcare providers, and punitive laws targeting vulnerable populations (*Impediments to Reproductive Justice: The Criminal Legal System and American Carceral State*, 2024). These measures not only curtail personal freedoms but also weaken public trust in democratic institutions and the judiciary's impartiality. The United States demonstrates that the erosion of bodily autonomy is not an isolated issue but a symptom of broader democratic fragility.

Democracies that fail to protect reproductive rights inherently disempower women as political agents, restricting their participation in public life and limiting access to economic opportunities and decision-making processes. Bodily autonomy is a fundamental prerequisite for women to exercise full citizenship rights, enabling access to education, employment, and political representation. Without these rights, women's ability to contribute equally to society

and democracy is significantly undermined. Authoritarian and populist regimes frequently target women's bodily autonomy as part of broader efforts to consolidate power and control marginalized populations. Policies restricting abortion rights are often coupled with wider suppressions of civil liberties, attacks on minority groups, and the erosion of democratic norms (Brechenmacher, 2024). These actions reflect a strategy of using control over women's bodies as a means to reinforce authoritarian agendas. Protecting bodily autonomy is not just a matter of gender equality; it is a structural necessity for a healthy democracy. Ensuring reproductive rights fosters equal participation and representation for all citizens, reinforcing the foundational principles of democratic governance.

France's emphasis on universalism and secularism has minimized religious influence while reinforcing centralized protections. Meanwhile, the U.S.'s fragmented governance and racialized history have deepened inequities and polarized access to reproductive rights. Intersectionality underscores the necessity of considering these multifaceted dynamics to understand and address the distinct challenges each nation faces in protecting women's bodily autonomy. Intersectionality highlights that women's experiences are not monolithic but are shaped by intersecting identities such as race, class, religion, immigration status, and geographic location. Policies related to bodily autonomy do not exist in isolation; they interact with systemic inequalities and power structures, resulting in uneven impacts across different groups of women (United Nations Population Fund, 2021).

Marginalized populations often face compounding barriers that exacerbate their vulnerability, limiting their ability to exercise bodily autonomy. Without accounting for these dimensions, policies risk reinforcing existing disparities and excluding the most vulnerable populations. Intersectionality provides a critical framework for understanding why policies protecting bodily autonomy may succeed in one context, like France, where centralized governance and societal consensus mitigate disparities, but face resistance and fragmentation in another, such as the United States, where systemic inequities and polarization undermine uniform implementation. This lens emphasizes the importance of tailoring policy design to address the specific needs and challenges of diverse populations.

In the United States, bodily autonomy is profoundly shaped by race, class, geography, and religion, leading to significant disparities in reproductive healthcare access. Women of color are disproportionately impacted by abortion restrictions due to systemic barriers such as limited healthcare access and economic vulnerability. Historical injustices, including the forced sterilization of Black, Latina, and Indigenous women, have left a legacy of distrust in the healthcare system. These historical wounds are compounded by modern anti-abortion legislation, which disproportionately targets women of color through punitive measures, including the criminalization of pregnancy outcomes (Human Rights Crisis: Abortion in the United States After Dobbs, 2023). Economic disparities further exacerbate access to abortion care. Abortion policies in the U.S. are heavily influenced by Christian conservative ideologies, with regions of high religious adherence experiencing stricter restrictions (Castle, 2011). Women from religious minority backgrounds face additional marginalization, grappling with both state-imposed restrictions and stigma within their own communities (Life at the Margins, The Challenges of Multiple Discrimination). In the United States, the fragmented federal system, historical racial injustices, and strong religious influences amplify intersectional

inequalities, creating a deeply uneven and inequitable reproductive healthcare landscape.

Table 6. Comparative Insights: Intersectionality in Policy Outcomes

Factor	France	United States
Legal framework	Universalist policies with constitutional protections	Fragmented protections reliant on state laws
Racial inequalities	Often overlooked under universalist principles	Deeply imbedded in historical and legal systems
Class barriers	Partially mitigated by universal healthcare	Amplified by lack of federal funding and medicaid restrictions
Immigration status	Structural barriers for undocumented women	Severe barriers, compounded by punitive policies
Religious influence	Minimized by laïcité	Strong influence of christian conservatism
Policy consistency	Uniform across the nation	State-by-state variability

Intersectionality offers a vital framework for understanding democratic resilience, exposing how systemic inequalities erode the universality of rights protections. It underscores that effective reproductive rights policies must explicitly address intersectional vulnerabilities, rather than presuming a one-size-fits-all approach (Hankivsky, 2014). The degree to which reproductive rights are protected reflects a democracy’s capacity to recognize and dismantle intersecting forms of oppression, including those based on race, class, gender, and religion. For reproductive rights to be meaningfully safeguarded, policies must extend beyond legal frameworks to address the root causes of inequality through an intersectional lens. France exemplifies the potential of institutional safeguards and centralized protections, demonstrating how proactive measures can mitigate inequities. Conversely, the United States illustrates the consequences of failing to confront systemic barriers, resulting in fragmented access to reproductive healthcare. Together, these cases provide valuable lessons on how intersectionality shapes policy outcomes and why addressing these dimensions is essential for fostering democratic resilience and true equality.

Collecting and analyzing data on disparities across race, class, geography, and immigration status can provide insights into systemic inequities and guide evidence-based solutions. Addressing regional disparities in healthcare infrastructure and funding allocation is essential to ensuring equitable access to reproductive healthcare services nationwide. By leveraging data, policymakers can identify and eliminate structural barriers that disproportionately affect marginalized groups. To combat the spread of misinformation about reproductive healthcare, governments, advocacy groups, and social media platforms must collaborate on fact-checking initiatives and public information campaigns.

These efforts should focus on correcting false narratives about abortion and contraception while providing accurate, evidence-based information to the public. Transparent and accessible online resources can help empower individuals and counteract the harmful impact of disinformation. Laws protecting the digital privacy of individuals seeking reproductive healthcare services are essential in the digital age. Legislation should prevent data tracking,

surveillance, or the misuse of digital health records. This includes safeguarding against the weaponization of personal health data by law enforcement or anti-abortion groups, ensuring that individuals can access reproductive services without fear of exposure, intimidation, or legal repercussions. These protections are critical for preserving autonomy and trust in healthcare systems.

Democracies must ensure their reproductive policies align with international human rights treaties and obligations, such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW). Engaging in peer review processes through international organizations can help hold governments accountable for violations of reproductive rights, fostering global solidarity and encouraging compliance with human rights standards. International funding and logistical support are critical for providing reproductive healthcare services in regions facing severe restrictions or bans. This includes funding clinics, supporting advocacy groups, and delivering essential resources to underserved areas. In polarized democracies, protecting women's bodily autonomy transcends reproductive rights—it is integral to upholding the democratic principles of equality, freedom, and justice. For democracies to remain resilient: reproductive rights must be recognized as essential to democratic health and stability.

Institutional, legislative, cultural, and societal safeguards must operate in unison to provide comprehensive protections. Intersectionality must guide policy design, addressing systemic inequities and ensuring that protections extend to all individuals. This commitment will ensure that societies remain inclusive, just, and resilient, even in the face of political polarization and ideological backlash.

7. Conclusion

The comparative analysis of women's bodily autonomy in France and the United States reveals a profound divergence in how democratic ideals and structures shape the protection of reproductive rights. Both nations, born of revolutionary ideals emphasizing liberty and equality, have traveled starkly contrasting paths. France's centralized governance, secular principles, and constitutional commitment to equality have fostered a robust framework for protecting women's reproductive rights. By enshrining abortion rights in its constitution, France has established a stable and enduring safeguard against political and ideological interference. This approach reflects the power of societal consensus and proactive policymaking in ensuring democratic resilience and gender equality. In contrast, the United States' fragmented federal structure, polarized political climate, and pervasive religious influence have created a precarious and unequal landscape for women's bodily autonomy. The reliance on judicial precedents such as *Roe v. Wade*—without the constitutional enshrinement of reproductive rights—has left these rights vulnerable to erosion.

The 2022 *Dobbs v. Jackson Women's Health Organization* decision exposed the fragility of a system reliant on judicial interpretation and highlighted the deep divisions within American society regarding reproductive healthcare. The lessons from France and the United States emphasize that the protection of bodily autonomy is not solely a gender issue but a cornerstone of democratic integrity and human rights. France's success underscores the importance of

embedding protections in constitutional frameworks, fostering broad societal consensus, and insulating public policy from ideological and religious interference. The United States, on the other hand, illustrates the dangers of polarization, judicial overreach, and systemic inequalities in undermining access to fundamental rights. Moving forward, policymakers, activists, and global stakeholders must recognize that the fight for reproductive rights is inseparable from the broader struggle for democracy, equality, and justice.

Effective policies must address intersectional inequities, counter misinformation, and adapt to the evolving challenges posed by globalization, digitalization, and ideological extremism. Ultimately, the contrasting paths of France and the United States offer valuable insights for democracies worldwide. By prioritizing the protection of bodily autonomy, nations can not only advance gender equality but also strengthen their democratic institutions, ensuring that liberty and justice remain accessible to all. In an era marked by rising authoritarianism and democratic backsliding, the safeguarding of women's rights is a litmus test for the resilience and inclusivity of democratic societies. Only through collective action, inclusive policymaking, and unwavering commitment to human rights can democracies ensure that no one is left behind in the pursuit of equality and freedom.

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