

119TH CONGRESS
2D SESSION

H. RES. 1147

Recognizing the United States legacy of dismissed pain and denied autonomy in women’s health care, and affirming the Federal Government’s duty to protect individual dignity and advance patient-centered care in women’s health.

IN THE HOUSE OF REPRESENTATIVES

MARCH 30, 2026

Ms. ANSARI (for herself, Mrs. BEATTY, Mr. BELL, Ms. BROWNLEY, Mr. CARTER of Louisiana, Ms. CLARKE of New York, Mr. CONAWAY, Mr. GOLDMAN of New York, Mrs. GRIJALVA, Mr. JACKSON of Illinois, Mr. JOHNSON of Georgia, Mr. KENNEDY of New York, Mr. KRISHNAMOORTHY, Mr. MCGARVEY, Ms. NORTON, Ms. PRESSLEY, Ms. ROSS, Mr. THANEDAR, Ms. TLAIB, Mr. TONKO, Mrs. TRAHAN, Ms. VELÁZQUEZ, Ms. WILLIAMS of Georgia, and Ms. WILSON of Florida) submitted the following resolution; which was referred to the Committee on Energy and Commerce

RESOLUTION

Recognizing the United States legacy of dismissed pain and denied autonomy in women’s health care, and affirming the Federal Government’s duty to protect individual dignity and advance patient-centered care in women’s health.

Whereas for generations, women in the United States—especially Black, indigenous, immigrant, LGBTQ+, disabled, and low-income women—have endured a system that too often treats their comfort as secondary, their pain as exaggerated, and their autonomy as negotiable;

Whereas the field of gynecology, while ranked high in patient trust and satisfaction compared to other medical disciplines, was historically built in part on the exploitation and sterilization of Black, enslaved, Puerto Rican, indigenous, immigrant, and disabled women without their consent, and remains a relatively under-researched area of medicine;

Whereas this history also includes the coercive testing of contraceptive pills on women and girls in Puerto Rico;

Whereas countless women continue to experience their pain being dismissed or minimized, contributing to delayed diagnoses, untreated conditions, and unnecessary physical and psychological suffering that could have been prevented;

Whereas American history is marked by laws and medical practices that have required spousal or State approval for women to make choices about their own bodies and private medical decisions, like whether to access contraception, undergo sterilization, or terminate a pregnancy;

Whereas recent escalation of rollbacks on reproductive rights, including on the constitutional right to abortion, have only worsened access to care for women's health conditions, endangering reproductive health outcomes and directly causing preventable medical emergencies not seen in over half a century; and

Whereas the future of women's health care must center justice, bodily autonomy, and empowering patients to make informed decisions about their reproductive, sexual, and menstrual health: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

1 (1) recognizes the historical and ongoing injus-
2 tices that deny women the dignity, seriousness, and
3 respect they deserve;

4 (2) honors the women, especially marginalized
5 women, who have been denied agency over their bod-
6 ies and suffered due to systemic neglect and bias;

7 (3) affirms the need for shared decision-making
8 and patient-centered approaches to gynecological
9 and reproductive care, including patient education,
10 procedural transparency, and expanded research on
11 women's health conditions;

12 (4) commits to expanding access to reproductive
13 and gynecological health care, strengthening protec-
14 tions for bodily autonomy, increasing Federal invest-
15 ment in women's health research, and holding insti-
16 tutions accountable for bias and harm; and

17 (5) emphasizes the need to end the normaliza-
18 tion of pain and address the implicit and structural
19 biases within reproductive and gynecological care.

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