

2025
Award Winner

Standing Her Ground

Caitlin Bernard, MD '10, and the fight to preserve reproductive healthcare

Caitlin Bernard, MD '10, is in her car driving from her home in Indianapolis to Champaign, Illinois, where the OB/GYN travels twice monthly to provide medical care at a Planned Parenthood Clinic.

The two-hour drive each way is a perfect time to catch up on books, podcasts, and calls, including with reporters who want to share her story.

Three years ago, Dr. Bernard became a lightning rod in the national abortion debate, transforming her from a locally respected OB/GYN into one of the most recognized physicians in America.

It all started with a phone call she received in June 2022 from a child-abuse pediatrician in Ohio. Would Bernard see a 10-year-old rape victim who needed an abortion but had just passed Ohio's newly imposed six-week limit?

As horrifying as that scenario is to many of us, the urgent request was not unusual for Bernard. "Unfortunately, these stories are very common in our world," she says.

It came just three days after the Supreme Court's *Dobbs v. Jackson Women's Health Organization* decision overturned *Roe v. Wade*, and the consequences were already becoming devastatingly obvious. When an *Indianapolis Star* reporter overheard Bernard mention the case at a rally and asked to include it in an article, she agreed—never identifying the patient.

The story went viral. President Joseph Biden referenced it in an executive order announcement. Media outlets worldwide covered it as dramatic evidence of post-Dobbs America. Then came the backlash: accusations that Bernard had fabricated the story, an investigation by Indiana's Republican attorney general, claims that she had failed to maintain professional standards, and a reprimand from the state medical licensing board

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for allegedly breaching patient privacy—an allegation both Bernard and her employer, Indiana University School of Medicine, rejected as politically motivated.

During a 14-hour hearing, as white-coated colleagues sat behind her in solidarity, Bernard faced intense, even personal, questioning. "Do you have a tattoo of a coat hanger that says, 'Trust Women'?" one deputy attorney general asked. (She does, on her foot.)

Bernard received death threats requiring security measures, faced harassment from politicians and pundits, and saw her professional record tarnished. The experience was "very scary," she says. "Not knowing exactly what was going to happen; not knowing if this was going to impact my ability to continue working where I work, my ability to continue

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seeing patients. And certainly, I was scared for my personal safety and for the safety of my family.”

Yet support poured in. Colleagues raised nearly \$100,000 for her legal defense. Hundreds of Indiana doctors signed an open letter in her support. National organizations honored her courage: the ACLU of Indiana’s Sig Beck Award, the AMA Foundation’s Courage in Women’s Health Advocacy Award, and *Time Magazine’s* list of the 100 most influential people of 2022. She was profiled in *Vanity Fair* and the *New Yorker*. In September, she was honored at her 15-year College of Medicine Reunion as the 2025 Outstanding Young Alumna.

“In many ways, there’s nothing special about me or the stories that I’ve told,” says Bernard. “So, I’ve really tried to the best of my ability to represent the voices of my colleagues and our patients across the country who are dealing with all of the exact same things that I’m dealing with.”

A NEW REALITY

Bernard loves being an OB/GYN. “It’s a really unique way to be able to support women at a critical time in their life during a pregnancy, whether that’s unplanned or planned and wanted,” she says. “Whether they’re having complications or just having a happy, healthy delivery, you can really be a good supporter for them.”

But her current work life reflects the fragmented reality of reproductive healthcare in America. Recently promoted to associate professor and serving as director for Indiana University’s Division of Complex Family Planning, Bernard splits her time between providing complex family planning care within Indiana University’s hospital system—the only legal abortions in the state—and traveling to Planned Parenthood in Illinois to provide care for Indiana residents who don’t meet the strict exceptions. She also maintains a full OB/GYN practice, covering labor and delivery, taking overnight hospital calls, and staffing emergency rooms.

“The amount of work that we have to put in for each



Caitlin Bernard, MD '10

individual patient to be able to get the care that they need is really tremendous,” she explains. Each potential abortion in Indiana requires consultation with at least two physicians, including a high-risk OB specialist, extensive documentation, and careful legal review.

“We have policies and protocols in place at the institution level, which has obviously taken a lot of work to develop with lawyers and administrators,” she says. “But at the end of the day, we really don’t know what could happen if somebody disagreed with us. Our state government has certainly made it clear they intend to enforce the law.”

Bernard fields calls from physicians across Indiana who have “really quite sick” patients who would benefit from abortion care but are afraid to even advise it as an option. “Certainly, there’s nothing in the Indiana law that says that you can’t advise a patient that an abortion would be helpful, but physicians are still very scared,” she says.

The consequences reach far beyond access. Three maternity hospitals in northern Indiana have closed since the abortion ban took effect, partly due to difficulty staffing them with physicians. Bernard has seen an increase in requests for permanent sterilization from women worried about pregnancy complications. She counsels patients worried about getting pregnant because of previous complications during pregnancy. “If that happens again, and I poten-



Bernard in front of the U.S. Supreme Court during a 2017 leadership training institute hosted by Physicians for Reproductive Health

tially need what might be considered abortion care, would my life and my health be put in jeopardy because I can't access that care?" they ask.

Bernard is also training the next generation of OB/GYNs and worries about the future of women's health-care. Applications to OB/GYN residencies in states with abortion bans have dropped nearly seven percent.

"At first, we saw increased interest," she says. "But as more states ban abortion and fear rises, students are second-guessing taking this on as a career because of the risk associated with it."

Still, she encourages them. "It's a wonderful field. There's nothing else I would ever want to do," she said. "But advocacy is now absolutely part of the job."

Practicing in a conservative state, Bernard knows her activism has made an impact. "Pushing institutions to do the right thing for patients and for their doctors is definitely a big part of what I do," she says.

"I think I've been successful in changing the culture of my institution to recognize the importance of our role. If we're not here, there's literally no one to take care of these women," she says. "Whatever their personal beliefs, the administrators, the lawyers, the nurses, the other physicians that I work with really understand that this is life-saving medical care that needs to be preserved."

ROOTS OF ADVOCACY

Bernard's path to activism was set long before medical school. Born in 1984 on a communal farm in Binghamton, New York, she grew up in a household where social justice was a core value.

Her father, a carpenter and community organizer, brought her on volunteer trips to Puerto Rico to build playgrounds and install septic tanks. Her mother, a laboratory researcher, took young Caitlin to Take Back the Night marches.

"It was really impressed upon me that it's important to kind of find something that can help you contribute to the world," Bernard says of her upbringing.

By high school, she knew she wanted to become an OB/GYN. While studying at Binghamton University, she volunteered as a doula and at Southern Tier Women's Health Services, the clinic once targeted by militant anti-abortion activist Randall Terry. Bernard saw firsthand how the reproductive rights community—her parents included—rallied to protect and support the clinic. "Showing them that they were protected made a lasting impression," she says.

When Bernard entered Upstate Medical University in 2006, she found a mentor who would help shape her career: Phil Ferro, MD '54, one



Bernard's clinical work encompasses the full spectrum of reproductive healthcare, from routine obstetrics to complex pregnancy complications and contraceptive care.



Bernard with fellow class of 2010 alumnae at Reunion 2025

of New York's first abortion providers, who had performed the procedure even prior to Roe.

Dr. Ferro's stories of women who had died from unsafe abortions and physicians who practiced in secrecy made clear the stakes of reproductive freedom.

"He and others of his generation felt they had to hide, that they couldn't be public about what they were doing, even though they knew it was right," Bernard says. "I really believed it could be different, that we could make progress from his career to mine and be public about why this work is important and necessary."

Another influential figure, Peter J. Cronkright, MD, ran migrant farmworker clinics where Bernard volunteered. These physicians helped provide Bernard with more than clinical skills; they gave her a moral framework and a sense of mission.

After completing her residency at Upstate in 2014, Bernard spent a year in Kenya with AMPATH, a collaborative focused on sustainable, equitable healthcare led by Indiana University and the Kenyan government. She then pursued a fellowship in complex family planning at Washington University in St. Louis, earning a master's in clinical investigation along the way.

It was there that her advocacy sharpened. As Missouri lawmakers advanced increasingly restrictive abortion legislation, Bernard testified against measures designed to limit access.

In 2017, she joined the faculty at Indiana University School of Medicine with two clear goals: to continue her global health work with AMPATH and to build the university's Complex Family Planning Program in a state already hostile to reproductive rights. She also began working with Planned Parenthood clinics in Indianapolis, Bloomington, Louisville, and eventually—after Indiana's abortion ban—Champaign, Illinois.

Her work extended beyond clinical care to education and institutional change. She developed curricula for medical students on pregnancy options counseling,

created surgical simulation training for residents, and pushed administrators to improve access to reproductive healthcare.

Bernard's own advocacy continues on multiple fronts. She serves as co-legislative chair for ACOG's Indiana section, provides expert testimony in legal challenges to abortion restrictions, speaks at national conferences, and writes op-eds. In November 2024, she spoke at the Association of American Medical Colleges annual meeting on a panel titled "How can we confront the criminalization of medicine?"

She maintains her global health work with AMPATH in Kenya, overseeing educational programs and research. To recharge, she practices yoga, spends time outdoors, and visits family scattered across the country.

BALANCING MISSION AND RISK

Bernard and her husband—with whom she has two young children, ages three and six—have discussed moving to another state. But the idea that people can simply relocate from red states to blue states for safety rings hollow to her.

"We're the United States. We need to stand together wherever we are," she says.

Her mission-driven career is non-negotiable. "That includes providing abortion and ensuring access to reproductive health care in places where it's not easily accessible," she says. "I don't think that I would be as happy not doing that, but it is hard, sometimes, to balance against the risks."

That determination reflects lessons from Dr. Ferro and the generation of providers who provided abortion care in the years before Roe. "I don't intend to go back into the shadows," Bernard says.

When asked what she wants her medical school peers to know about her career, Bernard turns reflective. "I went to medical school with a very clear plan of what I wanted to do," she says. "The fact that I was able to achieve that is a testament to the support that I received at Upstate, from my mentors, teachers, friends, and colleagues. I'm forever indebted to that."

She says her career illustrates that you can make a big impact in ways you never expect or anticipate. "When we support each other, no matter what our specialties are, we hopefully can see progress in access to care and move towards social justice together."

That collaborative vision—rooted in the communal values of her childhood and nurtured through her medical training—sustains Bernard through the most difficult days.

"There is something to be said for having a mission-aligned career that is much more than just a job," she says. "I am very thankful for that." ■