

“A State of Crisis: Examining the Urgent Need to Protect and Expand Abortion Rights and Access”

House Committee on Oversight and Reform

10:00 AM, Thursday, October 30, 2021

Statement for the Record

Rep. Gerald E. Connolly (D-VA)

Chairwoman Maloney, thank you for holding this hearing examining the urgent crisis facing abortion access in the United States. I am proud to say that I am a long-time advocate for women’s reproductive rights and the right to choose. Men must be an ally for women in the fight for reproductive justice, and this includes engaging in these crucial conversations.

The U.S. Supreme Court recently decided to allow a radical six-week abortion ban, known as Texas Senate Bill 8 (SB 8), to go into effect. Their decision essentially gives Texas the green light to render *Roe v. Wade* meaningless. While the Supreme Court appears baffled by the novel approach SB 8 takes to restrict abortion access, it is actually part of the long-time strategy of anti-abortion ideologues who use intimidation to eliminate the constitutional right to abortion. Since 2011, anti-abortion lawmakers nationwide have enacted nearly 500 bills restricting access to abortion care. In this year alone, state legislatures have proposed roughly 600 state-level abortion bans and restrictions. As of August, more than 90 have been enacted.

In Mississippi, this strategy has been carried out with impunity. Women and health care providers live under a complex web of restrictive and invasive laws impacting health care:

- targeted restrictions on abortion providers, or TRAP laws, designed to make it impossible for abortion providers to comply with the law;
- a 24-hour mandatory delay for women to receive an abortion; a requirement to make two separate trips to the clinic;
- a requirement that physicians provide abortion care;
- a ban preventing physicians from using telemedicine for any abortion-related care;
- a ban on abortions after 15 weeks accompanied by civil penalties for physicians; and
- criminal penalties for physicians that provide an abortion after 6 weeks.

The result? A single abortion clinic remains open in all of Mississippi: Jackson Women’s Health Organization.

This fall, the Supreme Court will hear *Dobbs v. Jackson Women’s Health Organization*, a case in which the State of Mississippi has asked the Court to overrule *Roe v. Wade* and *Planned Parenthood v. Casey*. If the Supreme Court’s refusal to block the Texas law, which stands in clear violation of the precedent established in *Planned Parenthood v. Casey*, is any indication of their response to this upcoming case, then *Roe v. Wade* and an individual’s right to freedom in health care are in peril.

If Mississippi succeeds, and the Supreme Court overturns *Roe v. Wade*, the impact will go far beyond that state. Some states, for example, have unenforced abortion bans in their codes. They predate *Roe v. Wade*. Twelve states have trigger laws that would activate abortion restrictions immediately after a harmful outcome in the *Dobbs* case. The Center for Reproductive Rights estimates that 24 states will take action to ban abortion if *Roe* falls.

As a result of SB 8, it has been reported that Oklahoma abortion clinics are inundated by women forced to travel from Texas for health care. Abortion care restrictions already fall disproportionately on people of color, individuals from rural communities, or those with low incomes. Research has shown that women who are denied abortion care and give birth experience an increase in household poverty lasting at least four years – compared to those who receive an abortion. The bottom line is that where you live or how much you earn should not limit your access to health and reproductive care options or curb your chances of escaping poverty.

That is why I proudly voted for the Women’s Health Protection Act (WHPA), which would establish a national standard protecting abortion access in every state. This critical piece of legislation passed the House of Representatives on September 24, 2021. Now is the time for the Senate to pass WHPA – to ensure that extremist state lawmakers do not dictate a person’s ability to receive to abortion care. Congress must also pass the Equal Access to Abortion Coverage in Health Insurance (EACH) Act to finally overturn the Hyde Amendment, which bans the federal government from covering abortion services for enrollees in their insurance, such as Medicaid, TRICARE, or the Federal Employees Health Benefits Program.

This dangerous crusade from state legislatures is not about the health and well-being of our nation. These laws are about controlling and manipulating women and their health care choices. These lawmakers seek to use the power of the state or state-sanctioned vigilantism to forcibly control women and their life choices. If Republicans cared about the health of women, they wouldn’t relentlessly attack the Affordable Care Act, or oppose Medicaid expansion, and sit idly by as our country kills a shockingly high number of black women as a result of our country’s unacceptable maternal mortality crisis.

Instead, Republicans have made their relentless attack of the Affordable Care Act a cornerstone of their party, attempting to repeal the law in Congress and the Courts and refusing to expand Medicaid, even though the benefits are overwhelming.

I recognize that the well-funded extreme ideologues behind SB 8 have honed their message well. So well, in fact, they march against reproductive rights and cheer on the death penalty. Make no mistake *Roe v. Wade* is in crisis and I hope today’s hearing can serve as a call to action before it is too late.