

## United States House of Representatives Committee on Energy and Commerce Subcommittee on Health

Hearing
H.R. 2975, The Women's Health Protection Act

Testimony Submitted for the Record by the National Network of Abortion Funds

February 12, 2020 Washington, DC



Dear Chairman Pallone, Chairwoman Eshoo, Ranking Member Burgess, and Members of the Subcommittee:

The National Network of Abortion Funds (NNAF) is a non-profit organization that builds power with members to remove financial and logistical barriers to abortion access by centering people who have abortions and organizing at the intersections of racial, economic, and reproductive justice. With over 70 member organizations across the United States and abroad, NNAF is working to make sure every reproductive decision, including abortion, is supported and free from coercion, and advocates for all people to have the power and resources to care for and affirm their bodies, identities, and health for themselves and their families—in all areas of their lives so that as we shift the conversation about abortion, it will become a real option, accessible without shame or judgment.

As an organization committed to addressing the gap between rights and realization of reproductive health care, we are writing to express our full support for H.R. 2975, the Women's Health Protection Act, federal legislation that would protect abortion access from the state-level bans and medically unnecessary restrictions that are currently reducing or eliminating access to care across the country.

Access to comprehensive reproductive health care is essential to people's health, well-being, and ability to participate equally in their communities. Furthermore, the U.S. Supreme Court has repeatedly affirmed—most recently in 2016—that abortion is a fundamental right and that undue burdens on access violate the Constitution.

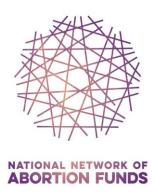
Yet, anti-abortion politicians continue to push increasingly extreme and harmful laws that single out abortion care for restrictions that do not apply to similar health care. Laws which institute hurdles such as mandatory waiting periods, mandatory ultrasounds ultimately delay care, in some cases entirely blocking access, and are intended to shame people seeking abortion services. Everyone deserves the ability to make personal health decisions and seek abortion care free from political interference and judgement.

The Women's Health Protection Act would safeguard the right to access abortion care free from medically unnecessary restrictions and bans on abortion. By passing this bill, Congress is taking an important step to ensure that the right to abortion first recognized in Roe v. Wade is a reality for people everywhere.

These laws, often presented under the guise of being health and safety regulations, are motivated by extreme ideology and do nothing to protect patient well-being, but instead cause additional hardship. Denial of abortion care can have serious long-lasting consequences on a person's health and well-being including increasing the risk of experiencing poverty, physical health impairments, and intimate partner violence. These restrictions delay and block access to care, increase costs to patients, create inequities in access to health care, and are meant to shame people seeking abortion care.

Barriers to abortion access, promulgated via a coordinated nationwide strategy stigmatize and dismantle abortion rights, have..." made the constitutional right to access abortion dependent on, among other factors, where a person happens to live. Today, nearly 90 percent of American counties are without a single abortion provider, leaving millions of people to travel long distances and incur sometimes insurmountable costs when seeking care. As a network of local organizations who directly interact with people trying to access reproductive care, we have seen first-hand the implications of clinics closing due to unreasonable regulations and felt the impact on our ability to serve the growing needs of people calling abortion funds for support.

Abortion is one of the safest medical procedures in the United States and should not be singled out and treated differently from other healthcare, particularly through restrictions that have no medical value and do nothing to benefit the health or safety of the pregnant person.



The National Network of Abortion Funds and member organizations work every day with those most affected by discriminatory anti-abortion policies and who are experiencing economic barriers to access abortion care. The financial and practical support provided is a vital public health resource given the difficulties accessing abortion in the U.S., and the increasing closure of clinics is only exacerbating already-existing barriers. The National Network of Abortion Funds created the George Tiller Memorial Abortion Fund in 2009 after the assassination of abortion provider Dr. George Tiller, upon request from Dr. Tiller's own office. This fund, which has since been renamed the Collective Power Fund, supplements the needs of local funds in high-need areas. During its years of operation as a direct funding provider (2009-2019), the Tiller Fund collected valuable information which holds the unique ability to show the impact of changes in policy on the ground.

A 2017 analysis of the Tiller Fund shows that people who call the Tiller Fund seeking abortion funding are becoming increasingly burdened with the responsibility of procuring resources and obtaining access for appropriate care, contributing to delays in access and costlier abortion procedures. The findings of the Tiller Report directly speak to the need for the Women's Health Protection Act, by pointing to the impact of fewer and fewer clinical options for accessing abortion care.

The National Network of Abortion Funds submits highlights from the Tiller Report in order to draw the House's attention to the real-world impacts of abortion restrictions that disproportionally harm people of color and those with lower incomes. For the full report please access at <a href="https://abortionfunds.org/tiller-fund-2017/">https://abortionfunds.org/tiller-fund-2017/</a>.

In recent years, anti-abortion politicians have drastically escalated their extreme efforts to prevent people from accessing abortion in their communities. Since 2011, anti-abortion politicians have pushed nearly 450 restrictive laws through state legislatures, contributing to the closure of clinics or the inability to find local providers, with significant impacts and consequences for pregnant people across the country.

• From 2010-2014, one quarter of abortion clinics in the United States closed, which impacted access for 30.5 million women in those areas.

As closures of clinics increases and access to practitioners becomes more difficult, people are forced to **travel** further and further distances, increasing economic barriers and compounding impacts on their needs such as transportation, lodging and childcare.

- During 2010-2014, when clinics began closing at a rapid pace, the average distance that Tiller Fund callers traveled fully doubled, from 97 miles in 2010 to 199.4 miles in 2014.
- As abortion care is physically put further out of reach and additional barriers such as waiting periods are
  enacted on clinics which remain, economic and logistical barriers are additionally compounded, including
  basic travel needs such as transit and lodging, lost wages, and childcare.

These impacts also disproportionately and discriminatorily **impact people in the South and Midwest**, where the majority of state-level restrictions on abortion have passed.

• This is reflected by the distribution of people who called the Tiller Fund for support, the majority of whom reside in the South (45.8%) and the Midwest (27.1%).

These policies also **disproportionately impact low-income individuals**, who already face the high cost of abortion procedures.

 Over one third of patients seeking funding from the Tiller Fund reported receiving some form of public assistance, which includes a range of programs such as SNAP (food stamps), WIC, or unemployment benefits.



When individuals are trying to surmount the economic, logistical, and emotional barriers to accessing abortion care, delays necessarily occur, **resulting in a higher likelihood of individuals requiring second-trimester procedures**, which present additional economic and logistical hardships.

 In one clear demonstration of this impact, upon the closure of almost half of the clinics in Texas, the state experienced a marked increase in second-trimester abortions.

The Women's Health Protection Act would put a stop to these harmful restrictions and bans, and protect the right to access abortion care for all, no matter where a person happens to live. The closing of clinics due to unnecessary regulations is not making abortion safer or more rare - it is creating unnecessary and cruel hardship in the lives people experiencing medical need alongside economic hardship, impactful life circumstances, and geographic discrimination.

## Call to action to Congress

The results of this data analysis, combined with our collective research and service expertise related to abortion access, prompts us to conclude that many of the experiences highlighted in the NNAF Tiller Fund analysis can be attributed to regressive abortion policy at the state and federal level that impedes access to abortion. This national landscape of the experiences of people trying to access abortion care but lacking in the resources demonstrates the impact these changes are having locally.

Now is the time for Congress to step in and pass the Women's Health Protection Act. The regulations that the WHPA would prevent are actively compromising the health and wellbeing of pregnant people, especially those already experiencing the challenges of economic need and lack of access to resources.

The experiences of those who seek funding from abortion funds demonstrate the real-world, harmful effects of policies that set up barriers to access and make clear that such policies must come to an immediate end. The National Network of Abortion Funds respectfully submits the above data for the record and urges Congress to protecting the ability to access full reproductive care for all people - instead of making necessary medical procedures dependent on a person's financial status, life circumstances or zip code.

We commend this committee for holding a hearing on this critical piece of legislation.

Respectfully submitted by the National Network of Abortion Funds