



**Statement for the Record from
Planned Parenthood Federation of America and Planned Parenthood Action Fund**

**United States House Committee on the Judiciary Hearing Entitled
“The Texas Abortion Ban and its Devastating Impact on Communities and Families”**

November 4, 2021

Planned Parenthood Federation of America (“Planned Parenthood”) and Planned Parenthood Action Fund (“the Action Fund”) submit these comments for the U.S. House Committee on the Judiciary, hearing entitled “The Texas Abortion Ban and its Devastating Impact on Communities and Families” held on November 4, 2021.

Planned Parenthood is a leading provider of high-quality, affordable health care and the nation’s largest provider of sex education. With more than 600 health centers across the country, Planned Parenthood health centers provide affordable birth control, vaccinations, lifesaving cancer screenings, testing and treatment for sexually transmitted infections, HIV screenings, and other essential care to 2.4 million patients each year. Planned Parenthood’s health centers are critical for many underserved communities, specifically communities of color and communities with low-incomes, facing limited access to reliable and affordable health care due to systemic barriers and discrimination.

For over two months, thousands of Texans have been forced to either make costly trips hundreds of miles across state lines to access constitutionally protected health care, or carry pregnancies against their will. S.B 8 bans abortion as early as six weeks into pregnancy in Texas, before many people even know they’re pregnant, meaning this law has decimated abortion access in the state. The impact is felt largely by Black, Latino and Indigenous people, those with low incomes, and people in rural areas — who have long faced barriers to abortion access. This is unconscionable. The state of Texas has gone too far, and S.B. 8 has gone on for too long — harming more patients in Texas with each passing day. Every day S.B. 8 is the law of Texas is one more day people are denied the ability to exercise their constitutional rights.

Right now, most people in Texas seeking an abortion are being denied the care they need. Patients are being forced to travel out of state to get an abortion or, if they are unable to travel, carry pregnancies to term against their will. According to a report from the Guttmacher Institute, Texas [patients](#) will now have to travel 20 times farther to get an abortion — increasing driving

times an average of 3.5 hours each way. Many Texans are now not able to access abortion unless they can afford to travel hundreds of miles out of state, take time off work, and arrange child care, transportation, and lodging

At the end of October, five Planned Parenthood affiliates in Texas and neighboring states shared stories in [an amicus brief](#) filed with the U.S. Supreme Court in the United States' challenge to Texas's S.B. 8, detailing stories of patients being denied abortions and the challenges to health care providers. A shorter version of the [brief was filed on October 11](#) in support of the U.S. Department of Justice's (DOJ) challenge to the radical law that has deprived Texans of the constitutional right to abortion.

Already, people who struggle to make ends meet are often forced to delay abortion services because they need time to secure the funds. Women who have abortions are disproportionately low-income, young, Black and Latina. In 2014, [75% of abortions were among low-income patients, and 64% were among black women or Latinas](#). In Texas, due to decades of racist economic policies, the poverty rate for Black women and Latinas is [disproportionately high](#), meaning they will be most impacted by this ban. The poverty rate among Black women in Texas is 19%, and is 20% for Latinas. In Texas, 37% of female-headed households live in poverty. Under current law, immigrants must navigate a complicated patchwork of health care coverage that often forces them to pay out-of-pocket for health care services, including abortion. Traveling out-of-state for an abortion is financially, logistically, and emotionally costly, and for many abortion patients — especially those who are Black or Latino, living in rural areas, or have low incomes — the service is out of reach.

For some, cost is just one barrier; immigration status and checkpoint concerns may also inhibit travel. In South Texas, Latino communities and immigrants already [face disproportionate barriers](#) to abortion due to long distances, travel restrictions, and border patrol checkpoints [scattered](#) along the [100-mile U.S.-Mexico border region](#). For undocumented women in the region, crossing an inland border patrol checkpoint to get an abortion poses the [risk of deportation](#). Pregnant Texans may also be forced to carry pregnancies to term against their will at risk of their health, in a state with one of the worst maternal mortality rates in the country. Because of structural racism in the maternal health care system and the state's lack of investment in social supports to help Black women and birthing people thrive, they are at a greater risk of dying or suffering severe complications during pregnancy, birth, and the postpartum period.

This law has isolated people seeking abortion — targeting their entire support network and discouraging their loved ones from helping them for fear of being sued. Patients may be scared to have an open conversation about their decision to have an abortion for fear of putting a loved one or other trusted person in legal jeopardy.

Although S.B. 8 is a Texas law, the negative effects are rippling throughout the entire country. In September 2021, Planned Parenthood health centers in surrounding states saw a 1082% increase in patients with Texas zip codes seeking abortion compared to September 2019 and

2020. Since the draconian law has taken effect, and in the days leading up to its effective date, Planned Parenthood of Rocky Mountains (PPRM)'s health centers [have seen](#) a significant spike in the percentage of patients traveling from Texas seeking abortions at their health centers in New Mexico and Colorado. There was a 1633% increase in patients with Texas zip codes seeking abortion at Planned Parenthood health centers in Colorado in September 2021, compared to prior years. In September 2021, at Planned Parenthood health centers in New Mexico there was a 48% increase in patients with Texas zip codes seeking abortion, compared to the previous year. On average, the Texas patients that PPRM has seen since S.B. 8 went into effect have traveled approximately 650 miles (one way) to access abortion out of state.

Planned Parenthood Great Plains and Planned Parenthood of Arkansas & Eastern Oklahoma's health centers [have also](#) witnessed the devastating effect S.B. 8 has had on Texans and their ability to access abortion. A nurse in Oklahoma, [said](#) many patients are 'coming [to Oklahoma] with a sense of desperation.' She recalls a patient who suggested she had been so desperate for the abortion that she would have undergone an abortion performed by someone who was not a 'real' healthcare professional if she had not secured care at the Oklahoma clinic." Similarly, another employee in Oklahoma, similarly reported "seeing Texas patients who drove ten hours through the night, and one patient who said she needed to leave by a certain time in order to get home to ensure her husband did not find out—but the clinic could not guarantee her departure time." The surge of Texans seeking abortions in their Oklahoma health centers since September 1 is unprecedented, and the demand only continues to grow. These demands are causing schedules to become extremely backlogged and there are significant fears from staff that the health center will not be able to continue to serve their existing patient population in Oklahoma in a timely manner given the overflow of patients coming from Texas. During September 2021, Planned Parenthood health centers in Oklahoma saw more than 250 patients with Texas zip codes seeking abortion compared to single digits in the previous year.

It is not just the states geographically touching Texas either. Since S.B. went into effect, in the month of September 2021, Planned Parenthood affiliates saw patients with Texas zip codes seeking abortion travel to Arkansas, California, and as far as New York for care. A southern Illinois Planned Parenthood health care center has [served patients](#) from Arkansas, Louisiana, Kentucky, Tennessee, and Texas. Patients are driving over twelve hours to access the health care they need — adding additional barriers such as finding child care, paying long-distance gas mileage, and overnight hotel stays. Kansas does not typically see patients with Texas zip codes seeking abortion, but in September 2021, Planned Parenthood health centers in Kansas saw 31 patients seeking abortion with Texas zip codes. The damage of the Texas law will only continue to spread as the backlog continues. The consequences of this will have severe impacts on patient's lives, forcing them to seek abortions later in pregnancy — which are more restricted and expensive, pressure patients in the surrounding states to scramble to seek care in other states farther away. Many pregnant people without the resources will be forced to carry unwanted pregnancies to term. This extreme law burdens patients seeking the health care they need and the providers, some who are the only providers at their health centers.

Access to abortion is at risk across the country. More than 100 abortion restrictions have been enacted by state legislatures in 2021 alone. In December, the Supreme Court will hear a case about Mississippi's 15-week ban that directly challenges *Roe v. Wade*, which protects each person's right to make their own decisions about abortion. We are seeing a surge of abortion restrictions sweeping the country. State lawmakers, emboldened by the new makeup of the Supreme Court and the more than 230 federal judges appointed during the Trump administration, are rushing to control the rights and freedoms of pregnant people. Texas's extremist S.B. 8 law, an unconstitutional six-week ban on abortion, is not an isolated example. It's part of a coordinated attack at the state level to restrict access to safe, legal abortion.

The 2021 state legislative season was the most hostile for reproductive health and rights since *Roe* was decided. According to the [Guttmacher Institute](#), nearly 600 abortion restrictions in 47 states have been introduced this year alone, and 97 of those have been enacted. This already far surpasses 2011 — previously the worst year on record — when 89 restrictions were enacted. But while these attacks are accelerating, they are not new. State legislatures have enacted over 1,320 restrictions in the 48 years since *Roe* was decided, including 580 restrictions enacted since 2011. By July 1 of this year, 8 states had enacted 11 abortion bans, including near-total bans in both Arkansas and Oklahoma; six week bans in Idaho, Oklahoma, South Carolina, and Texas; and reason-based bans in South Dakota and Arizona.

Twenty-six states are poised to move to ban abortion if *Roe v. Wade* were overturned — jeopardizing access for nearly half the country, 36 million women of reproductive age, plus trans men and non-binary people. Today, nearly 90% of American counties are without a single abortion provider, and 27 cities have become “abortion deserts,” because people who live there must travel 100 miles or more to reach a provider. There are currently five states with only one abortion provider. [80% of the American public supports legal abortion](#) and there is no state where outlawing abortion is popular.

For many people — especially immigrants, Black, and Latino communities — abortion is already a right in name only and S.B. 8 has decimated what little access remained. No one is free unless they have control of their own body and future. Every single person deserves access to sexual and reproductive health care, no matter their income, state of residence, zip code, or immigration status. Abortion is normal — nearly one in four women will have an abortion in her lifetime. Abortion is health care. And no one should take the right to access that health care away from you. We must protect safe, legal abortion for anyone no matter how much money they have, where they live, or whether they have insurance.

Sincerely,

A handwritten signature in black ink that reads "Jacqueline Ayers". The signature is written in a cursive, flowing style.

Jacqueline Ayers
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