

May 18, 2021

Dear Senator Carney, Representative Harnett, and Members of the Joint Standing Committee on Judiciary,

I join you today on behalf of the Maine Women's Lobby. For over forty years, the Maine Women's Lobby has advocated for public policy which increases the health, wellness, safety, and economic security of Maine women and girls, with a focus on the most marginalized populations and communities.

## We write today in opposition to LD 748, "An Act To Remove Coverage under the MaineCare Program for Abortions Not Covered by Medicaid," and LD 915 "An Act To Conform State Funding to the Federal Hyde Amendment Limiting Funding for Some Abortion Services."

When policymakers consider intervening in the private medical decisions that should take place between pregnant people and their providers, virtually all restrictions and limitations disproportionately harm women who are already marginalized or oppressed.

- Barriers to access for reliable, long-acting birth control means that women who live at the federal poverty level are five times more likely to experience unintended pregnancy.<sup>1</sup>
- These barriers mean that **abortion is more highly concentrated among women who are experiencing poverty**<sup>2</sup>; and women who are forced to carry unwanted pregnancies to term through lack of geographic or financial access, or other barriers such as waiting periods, are more likely to fall into poverty within a year.<sup>3</sup>
- The combined impacts of racism and classism mean that **women of color are disproportionately likely to be insured by the Medicaid program**: Thirty percent of black women and 24% of Hispanic women aged 15–44 are enrolled in Medicaid, compared with 14% of white women.<sup>4</sup>

Refusal to invest in the methods that reduce unwanted pregnancy, and to give people options to manage or end those pregnancies, constrains the lives and choices of the women least resourced to weather those storms. These bills specifically seek to control and coerce poor women and Black and brown women into carrying unwanted pregnancies, and all of the risk, expense, and emotional hardship that entails. We hope you will vote 'ought not to pass' on LD 748 and LD 915.

Sincerely,

Destie Hohman Sprague, Executive Director Maine Women's Lobby / mainewomen.org

<sup>&</sup>lt;sup>1</sup> U.S. Department of Health and Human Services, Annual update of the HHS poverty guidelines, Federal Register, 2011, 76(13):3637–3638, <u>http://www.gpo.gov/fdsys/pkg/FR-2011-01-20/pdf/2011-1237.pdf</u>.

<sup>&</sup>lt;sup>2</sup> Jones RK, Darroch JE and Henshaw SK, Patterns in the socioeconomic characteristics of women obtaining abortions in 2000–2001, *Perspectives on Sexual and Reproductive Health*, 2002, 34(5):226–

<sup>235, &</sup>lt;u>http://www.guttmacher.org/sites/default/files/article\_files/3422602.pdf</u>. <sup>3</sup> Foster, D. (2012). Socioeconomic consequences of abortion compared to unwanted birth. American Public Health Association.

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<sup>&</sup>lt;sup>4</sup> Frohwirth LF, Guttmacher Institute, special tabulations of data from the 2014 American Community Survey.