

Opening Statement
Chairman Frank Pallone, Jr.
Committee on Energy and Commerce
Subcommittee on Health
Hearing on “Protecting Women’s Access to Reproductive Health Care”
February 12, 2020

Today’s hearing is on legislation to protect women’s access to abortion care.

This legislation is necessary today because states have passed an onslaught of ideological bans and restrictions intended to interfere with women’s personal medical decision-making and to severely limit women’s access to abortion care.

Since 2011 alone, anti-abortion state lawmakers have passed nearly 450 restrictive laws with the sole purpose of making it more difficult for women to access this care. They’ve passed mandatory waiting periods, requirements for multiple in-person visits, and requirements that doctors provide their patients with medically inaccurate information about the potential risks of the procedure. They have also passed ridiculous and unnecessary building requirements for abortion providers that are intended solely to shut down clinics that provide abortion services.

The result of these increasingly restrictive laws is that women all across the country are having a harder time accessing abortion care, which they have a constitutional right to obtain. Comprehensive health care means having access to affordable abortion care, which is a safe medical procedure with far fewer risks than many routine medical procedures. Repeated studies have confirmed the safety of abortion, including comprehensive findings by the National Academics of Science, Engineering, and Medicine. It is a legal and safe procedure, but ideological state legislators continue to put up roadblocks for women and providers.

Today, nearly 90 percent of American counties are without a single abortion provider, and six states only have one abortion clinic in the entire state. The unfortunate reality in America is that your constitutionally guaranteed health care rights are now dependent upon where you live, and that is wrong.

Sadly, we know that anti-abortion restrictions fall hardest on those who already face significant barriers to health care: low-income women, women of color, LGBTQ people, young people, and people living in rural communities. At a time when we should all be working together to reduce health care disparities, we are watching states across the country actively pass legislation that increases those disparities. Their actions are putting access to care further out of reach. One particularly alarming study from the Center for Reproductive Rights and Ibis Reproductive Health found that states with more anti-abortion laws have poorer health outcomes generally for both women and children than states that have fewer restrictions. This should be alarming to all of us especially as we are faced with an increasingly dire national maternal health crisis that we also know disproportionately impacts women of color.

It is for all of these reasons that we are holding this important and timely hearing on the Women’s Health Protection Act. This legislation simply ensures that patients can access, and health care providers can provide, abortion services. It prevents medically unnecessary and burdensome restrictions

that single out abortion services and deny women access to care. It is long past time that we affirm women's health care rights by ensuring that they can actually utilize those rights. The Women's Health Protection Act would do just that by ensuring the constitutional right to have an abortion is a reality for all people, no matter where they live.

Finally, I want to thank our witnesses for being here today. I know that this can be a very personal and at times difficult conversation to have in a public setting. I want to express my sincere thanks and appreciation for being here today and sharing your experience and expertise with the Committee.

With that, I would like to yield the remainder of my time to Representative Schakowsky.