July 14, 2022

SUPPORT H.R. 8296, THE WOMEN’S HEALTH PROTECTION ACT OF 2022

Dear Representative:

On behalf of The Leadership Conference on Civil and Human Rights, a coalition charged by its diverse membership of more than 230 national organizations to promote and protect the civil and human rights of all persons in the United States, and the 63 undersigned organizations, we write in support of H.R. 8296, the Women’s Health Protection Act of 2022. We urge all members to vote in favor of the bill. The Leadership Conference will include this vote in its Voting Record for the 117th Congress.

This issue is one of grave urgency for the civil and human rights community and for people across the United States. As you know, the Supreme Court’s decision in Dobbs v. Jackson Women’s Health Organization took away the constitutional right to abortion established in Roe v. Wade and reaffirmed in Planned Parenthood v. Casey,¹ and paved the way for states to ban abortion outright. Indeed, seven states have already made abortion illegal and several others have effectively eliminated access, leaving people without access to essential health care. As many as 26 states could ban or further limit abortion in the near future, which would block more than half the people in the United States who could become pregnant from their right to an abortion, including 14.8 million reproductive-age women of color.² We have arrived at this perilous moment after a decades-long campaign by wealthy and powerful interests to rig the judiciary and stack our courts with extremists,³ including Supreme Court justices selected with the express purpose of overturning decades of legal precedent and ending legal abortion.⁴ Now that this decision has been issued, immediate congressional action is imperative to protect the ability of people who can become pregnant to control their own bodies, lives, and futures.

By protecting abortion access from medically unnecessary restrictions that obstruct the right of all persons to obtain safe, legal abortion services, the Women’s Health Protection Act (WHPA) seeks to remedy and prevent the onslaught of state-level abortion bans and restrictions that cause significant and sometimes insurmountable challenges to receiving abortion care. These restrictions disproportionately impact the ability of low-income women and women of color to access health care, robs pregnant people of bodily autonomy, and threatens the economic security of families and individuals, many of whom are already struggling to get by.

The findings and purpose laid out in H.R. 8296, like the version considered by the House last year, ground the bill in a vision of reproductive justice — the human right to maintain bodily autonomy, to have children, to not have children, and to parent the children we have in safe and sustainable communities.\(^5\) The findings highlight the white supremacist and misogynistic roots of abortion restrictions and bans. Equal access to abortion care — everywhere — is essential to social and economic participation, reproductive autonomy, and the right to determine our own lives. Every person deserves to have the ability to make the health care decisions that are right for them, and every person must be able to make their own decisions about having children, free from government interference and discrimination. We know that laws that restrict access to abortion cause the most harm to those people who, because of structural racism, ableism, and existing inequities, already have limited access to resources, already struggle to achieve economic security, and already face sometimes life-threatening health disparities. At the most basic level, restrictive abortion laws are aimed at controlling who can exercise their rights and who can claim agency over their bodies. As such, these laws are an affront to human dignity that perpetuate systems of oppression and prevent the full enjoyment of civil and human rights, and Congress ought to recognize them as such.

With the Court’s decision to overturn Roe, we urge you to support WHPA to address these systemic inequalities and secure abortion rights with federal protections at this critical moment for our nation.

Anti-abortion lawmakers have been emboldened to push to ban abortion nationwide, showing there’s no limit to their cruel attempts to control people’s personal health care decisions. Despite large public support for access to abortion,\(^6\) lawmakers across 19 states enacted 108 restrictions on abortion in 2021 — including the Mississippi law at issue in Dobbs.\(^7\) In 2022 to date, lawmakers in 42 states have introduced over 540 restrictions on abortion.\(^8\) This includes legislation that restricts access to medication abortion, imposes medically unnecessary restrictions on abortion clinics, or singles out abortion providers for burdensome restrictions not applied to other health care providers.\(^9\) Even before the Dobbs decision, access to abortion for many people was severely limited, with nearly 90 percent of U.S. counties reporting no abortion provider,\(^10\) forcing people to incur onerous costs to travel long distances for care, or pushing care entirely out of reach.

---


\(^8\) Id.

\(^9\) Id.

The decision in Dobbs overruled almost 50 years of legal abortion and opened the floodgates for further enactment and implementation of these damaging laws. They are a threat to the economic security, health, and dignity of low-income people, women of color, immigrants, LGBTQ individuals, people with disabilities, and others who — because of a history of structural inequality and discrimination — already have difficulty accessing reproductive health care services.\textsuperscript{11} These laws contribute to clinic closures and abortion deserts, which increase the costs of obtaining an abortion\textsuperscript{12} and build on the systemic inequality already faced by Black people who have diminished access to networks and resources to overcome financial obstacles to accessing care. Black women are half as likely to be able to travel 25 to 50 miles for abortion care than White women, who tend to have more financial resources, information, and social networks that allow them to travel.\textsuperscript{13} Further, restrictions on accessing abortion, in addition to public funding bans, mean that low-income people and many women of color have to choose between receiving abortion care and paying their rent, purchasing food, or paying for other basic necessities. Women who are denied abortions are more likely to experience poor health outcomes, including maternal death, as compared to women who receive abortions, a trend that is particularly concerning for Black women who are up to four times more likely to experience pregnancy-related death than White women.\textsuperscript{14} People with disabilities, who already have to fight for autonomy at every level, encounter increased risks of pregnancy-related complications and maternal mortality.\textsuperscript{15} Women who are denied an abortion and forced to bear a child are also four times more likely to fall into poverty.\textsuperscript{16} Conversely, abortion access has been shown to increase women’s participation in the workforce, particularly for Black women, and has led to gains in educational attainment.\textsuperscript{17}

The Women’s Health Protection Act would work toward a future where all of us are free to make the personal decisions that shape our lives, our futures, and our families. It is an important step in ending these harmful laws and promoting the health, economic security, and well-being of those whom we have forced through law and policy to live at the margins. With so much on the line, Congress must act decisively to protect our rights.

Thank you for your consideration of our views. Please contact Peggy Ramin, policy counsel for health care and poverty (ramin@civilrights.org), with any questions.

Sincerely,

The Leadership Conference on Civil and Human Rights
American Association of University Women
American Atheists
American Federation of Teachers
Americans for Democratic Action (ADA)
Americans United for Separation of Church and State
Asian Pacific American Labor Alliance, AFL-CIO
Association of Asian Pacific Community Health Organizations (AAPCHO)
Autistic Self Advocacy Network
Bend the Arc: Jewish Action
Center for Disability Rights
Center for Law and Social Policy (CLASP)
Clearinghouse on Women's Issues
Community Catalyst
DemCast USA
Democracy Initiative
Disability Rights Education & Defense Fund
End Citizens United / Let America Vote Action Fund
Equal Justice Society
Equal Rights Advocates
Equality California
Feminist Majority Foundation
Freedom from Religion Foundation
Health Care Voices
Human Rights Campaign
Indivisible
Interfaith Alliance
Japanese American Citizens League
Justice for Migrant Women
Justice in Aging
Lake Research Partners
Lambda Legal
LatinoJustice PRLDEF
League of Conservation Voters
League of United Latin American Citizens (LULAC)
Matthew Shepard Foundation
NAACP Legal Defense and Educational Fund, Inc. (LDF)
NARAL Pro-Choice America
National Association of Social Workers
National Black Justice Coalition
National Center for Lesbian Rights
National Center for Transgender Equality
National Council of Jewish Women
National Employment Law Project
National Health Law Program
National Immigration Law Center
National Latina Institute for Reproductive Justice
National Partnership for Women & Families
People For the American Way
PFLAG National
Planned Parenthood Federation of America (PPFA)
Public Advocacy for Kids (PAK)
Public Justice
Robert F. Kennedy Human Rights
Samuel DeWitt Proctor Conference
Service Employees International Union (SEIU)
Silver State Equality
Take Back the Court Action Fund
The AIDS Institute
Union for Reform Judaism
Women Employed
Women of Reform Judaism
World Without Genocide at Mitchell Hamline School of Law
YWCA USA