



## STATEMENT OF POLICY

### **Assure Access to Reproductive Health and Abortion Services**

**Mission:** The mission of NYSPHA is to promote and protect the public's health through professional development, networking, advocacy, and education.

**Vision:** Strengthening public health and taking action to make New York the healthiest state.

### **Problem Statement**

The 2022 Supreme Court of the United States (SCOTUS) decision to overturn *Roe v. Wade* will impact reproductive rights and health equity as nearly 50 years of reproductive access are rolled back. Across the United States, access to safe abortion facilities and reproductive health and family planning services are affected by this decision. New York State has been steadfast in its commitment to protecting abortion access and reproductive rights. In New York, the Governor and the State Legislature have sought to proactively protect these rights and access to these services.

Even before the SCOTUS ruling, gaps in access existed in New York in disadvantaged communities and were increased by economic, cultural, race, gender and class disparities, which will exacerbate adverse health outcomes.

### **Position Statement**

NYSPHA, as an advocate for public health, believes that access to all affordable reproductive health services, including safe abortions, is a fundamental human right that is essential to the health of all New Yorkers. People who become pregnant have the right to their own autonomy, including reproductive rights. Access to reproductive health care services is vital to public health without limitations of funding, coverage and access to health care facilities, to ensure the rights to safe abortions and decrease their risk of injury or death.

NYSPHA encourages all individuals, public health organizations, health care professionals, professionals in academia, community organizations and public officials to take action on assuring access to reproductive health services, including to safe abortion. In particular, it is important to recognize and address the stigma that occurs, especially to disadvantaged people and communities.

NYSPHA recommends specifically:

1. The New York State Governor and Legislature continue to vigorously protect access to affordable reproductive health services, including family planning services, contraception, and abortion, without restrictions or interference from local or state governments for all New Yorkers.
2. Increased funding for comprehensive maternal health care services including ready access to reproductive health services, including abortions, family planning, contraception, and equitable access to all health care facilities that provide these services, to those individuals affected by economic, social and structural disparities. This includes continued Medicaid coverage of abortion. This funding should anticipate increased individuals coming from other states seeking care.
3. Increased funding for expanded access to self-managed/telehealth medication abortions.
4. Develop educational programs that de-stigmatized abortion, remove its political connotation and improve the understanding that it is, at times, a medically necessary procedure.
5. Repealing of the Hyde amendment which prohibits the spending of federal funds for abortions and needs to be approved by Congress annually.
6. Protecting the doctor/patient privilege and the doctor's obligation to protect the privacy of the patient.
7. Funding and support for age-appropriate health and sex education in schools.
8. Increased funding for the public health infrastructures to collect data on the inequities and mental, physical, and financial impacts of abortion to ensure equitable access to health care facilities that provide reproductive health services.

## **Justification**

With the decision of the Supreme Court to overturn Roe vs Wade, abortions have been prohibited in many states, mostly in the central and southern parts of the US. In the Southeast US, over 50% of the US Black population and a great percentage of Black-Hispanic people live. In the Central US, an increased number of the indigenous population live. In these areas, access to abortion was already curtailed due to the Hyde amendment, calling for a nearly total ban on using federal funds for abortion services. The Hyde amendment disproportionately affects these areas as many of this population utilize Medicaid, severely limited access to abortion and health care facilities. These communities are already affected by poor health outcomes. The US has the highest maternal mortality rate among ten other high-income countries. In 2020, the mortality rate for non-Hispanic Black women was more than double of non-Hispanic white women (Bain et al., 2022).

In 2019, there were 629,898 legal abortions in the United States. In the same year, in New York State (outside NYC) and New York City, there were 28,803 and 49,784 reported abortions, respectively, mostly by women between 20 and 34 years of age (CDC, 2022). In New York, abortion is legal and available up to 24 weeks or later for any reason, and after 24 weeks if the health of the pregnant person is compromised or the pregnancy will not survive. Abortion is a safe health care service available to any person who can get pregnant (NYC Health, 2022).

The pivotal Turnaway Study identified four critical aspects and the harms of denying a woman a desired abortion. First, it creates economic insecurity and hardship, such as an increase in poverty level resulting in not enough money to cover everyday living expenses. Second, denying a woman an abortion keeps them in abusive relationships, and by five years post birth is more likely to raise the child alone. Third, the development of the child and the financial stability of the family is put at risk. Lastly, those women denied an abortion were more likely to experience adverse health problems than those who had an abortion (University of California San Francisco, 2022).

Keeping legal unrestricted access to telehealth medication abortion is essential. The California Home Abortion by Telehealth CHAT study identified the efficacy and safety of the telehealth administration of medication abortion (UCSF, 2022). Telehealth care is a way to expand specialized health care and can make health care accessible to underserved communities and remote areas that do not readily have access to health care facilities, and can include specialized pre-natal care, sexual and reproductive health care, and abortions through medicine (Donovan, 2019). During the COVID-19 pandemic, researchers from the University of California San Francisco, identified no adverse risks from administering a medication abortion and removing the in-person prescription requirement and additional in-person medical testing, such as Rh testing, ultrasound identification of pregnancy duration, or complications (Upadhyay et al., 2022).

Even with expanded access to telehealth, a digital divide still affects people of color, the poor, and the medically underserved in New York. In areas of the Bronx, which is the poorest borough in New York City, individuals experience decreased internet connectivity, lack of Wi-Fi, video chat or webcam access. The digital divide has worsened the social and economic factors that affect access to health care, including reproductive health care services within disadvantaged and rural communities (Clare, 2021). As new policies related to telehealth arise, abortion care must be integrated into the service platforms and should not be purposefully excluded from the investments and infrastructure (Donovan, 2019).

The promotion of no-cost contraception provides significant health benefits by reducing unwanted and high-risk pregnancies, maternal and infant morbidity and mortality, unsafe abortions, and medical therapy (Peipert et al., 2012). NYSPHA and the APHA support the universal, informed, and voluntary access to the full range of contraceptive methods, including emergency contraception (American Public Health Association, 2015).

NYSPHA, as an advocate for public health, recognizes that reproductive health care access to all is a fundamental human right and the right to unencumbered access is essential for the protection of safe abortions for all New Yorkers. NYSPHA's priorities are to advance health equity, access to health care services, including abortions, economic equality, social justice and the protection of women's rights.d

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### **Record of Action**

8/23/22 – Proposed by NYSPHA Policy and Advocacy Committee (PAC) Policy Workgroup

9/14/22 – Adopted by the PAC

9/28/22 – Approved by NYSPHA Board of Directors

