



CHRIS TAYLOR

STATE REPRESENTATIVE ♦ 76th ASSEMBLY DISTRICT

August 6, 2014

Via Electronic & Regular Mail

The Honorable Patrick Leahy,
United States Senator
Attn: Rebecca Cooper, Hearing Clerk
Senate Judiciary Committee
224 Dirksen Senate Office Building
Washington, D.C. 20510

RE: Response to questions for the record concerning the Women's Health Protection Act

Dear Senator Leahy,

Thank you for the opportunity to testify before the Senate Committee on the Judiciary in favor of "S.1696, the Women's Health Protection Act: Removing Barriers to Constitutionally Protected Reproductive Rights" on July 15, 2014. It was a true honor.

Enclosed are my responses to the follow up questions from Senator Richard Blumenthal and Senator Chris Coons.

Again, thank you for the opportunity to testify in support of the S. 1696. Please let me know if you have questions or need additional information.

Sincerely,

Representative Chris Taylor
Wisconsin's 76th Assembly District

**Senate Judiciary Committee Hearing on the Women's Health Protection Act:
Removing Barriers to Constitutionally Protected Reproductive Rights**

QUESTIONS FOR THE RECORD FROM SENATOR COONS

Question for Ms. Taylor

1. We currently have a situation in this country where a woman's constitutionally protected right to access abortion services depends on the state she lives in, the politics of the legislators in her state, and the amount of money she has. Is this fair, and what impact would passage of the Women's Health Protection Act have on ensuring that a woman's right to choose is respected equally, wherever she may happen to live?

Response:

People's ability to exercise constitutional rights should not be dependent on their zip code. It is extremely unfair that women in my state and in states throughout the country are being denied the ability to exercise their constitutionally-protected rights concerning their personal, private decisions about pregnancy. While states face a myriad of issues warranting diverse responses, the U.S. Constitution guarantees all Americans the most basic and fundamental rights, no matter which state they call home. As a country, we recognize that some rights are too precious to risk losing at the whim of a majority in a state legislature. That is why we have state and federal constitutions.

In Wisconsin, the state legislature has enacted many extreme laws in the last three years that do nothing to protect women's health or advance women's safety, and everything to do with impeding women's access to abortion, including telemedicine bans, medication abortion restrictions requiring unnecessary multiple trips to an abortion provider, increased criminal and civil liability for abortion providers, forced ultrasounds, and hospital admitting privileges which are wholly unrelated to the abortion care women receive. That is why the Wisconsin medical community unambiguously opposed these restrictions, with not one health care provider or entity testifying in support of these restrictions.

In fact, the primary purpose and effect of these restrictions is to shut abortion access down in the state of Wisconsin. For example, when I questioned the two sponsors of the hospital admitting privileges bill in the Assembly Health committee, on which I serve, about whether they would be willing to reconsider this bill if it resulted in shutting health centers down that provide abortions, they stated they would not.

If Wisconsin's admitting privileges requirement is ultimately enforced (it is temporarily enjoined by a federal court), at least one health center that performs one-third of the abortions in Wisconsin will shut down. This is also the only health center that provides abortions post 18 weeks of pregnancy. The remaining three health centers providing abortions estimate that the average three to four week wait for an abortion will be increased to between eight to ten weeks. Women who experience health or other pregnancy complications and need an abortion to preserve their health or lives post 18 weeks will also be required to travel out of state.

A delay of this magnitude clearly impacts all Wisconsin women seeking abortions. But the closing of a health center providing one-third of the abortions in the state will have particularly devastating effects on low-income women. At the trial on the hospital admitting privileges law, an expert on women and poverty in Wisconsin testified about the particularly devastating effects this health care closure and the resulting long wait would have on low-income women, who would be forced to travel to access abortion. These are women who typically rely on public transportation and cannot afford uncompensated work absences or additional child care costs.¹ For poor women, these additional barriers may be insurmountable, and a significant number will not be able to legally obtain the abortion they seek.

Many of these unconstitutional abortion restrictions have been struck down by courts throughout the country. In the meantime, however, legal, medical, and advocacy organizations are forced to spend their time and money fighting these restrictions, not to mention the thousands of tax-payer dollars the state is spending to defend these unconstitutional laws.

While many lawsuits wind their way through our courts, there is no guarantee that the lawsuits will ultimately prevail in protecting women's rights and women's health.

Patients are placed in legal limbo, and their health and lives may be compromised. When restrictions on medication abortion were passed in Wisconsin, which constitutes 25% of all abortions, most health centers stopped offering medical abortion for one year until legal relief was obtained. Women with scheduled appointments were denied access. Women had to reschedule appointments and opt for a different procedure than the one they had determined was their best medical option purely because of politics.

Some of these policies, like the forced ultrasound law, place real barriers between patients and health care providers. In most cases, women will be subjected to an invasive vaginal ultrasound. Women are unable to refuse, including women whose wanted pregnancies go wrong and the majority of sexual assault and incest victims who do not file police reports. Providers have reported that a patient's inability to refuse is creating divisions between the health care provider and patient, creating more tension and stress for the patient. Patients are frustrated that their health care is being dictated not by their best interests as determined by their physician but by politicians. At a minimum, it humiliates and degrades women, treating them like second class citizens who are denied the patient autonomy and personal decision making afforded most other patients.

These are some of the reasons why we need the Women's Health Protection Act. This Act prevents states from taking specific actions that impede women's access to abortion care that are unrelated to women's health and safety. Women in my state and other states that are controlled by politicians who ignore their constitutional rights need the federal government to pass the Women's Health Protection Act to ensure that these rights are a reality for everyone, regardless of where they live.

¹ Testimony of Jane Collins, a Professor at the University of Wisconsin and an expert on issues faced by women in poverty in Wisconsin, in the federal trial on the Wisconsin admitting privileges requirement, *Planned Parenthood of Wisconsin v. JB Van Hollen*, 13-cv-465-wmc.

Questions for the Record
Senate Judiciary Committee
Women's Health Protection Act Hearing
Senator Richard Blumenthal

QUESTIONS FOR CHRIS TAYLOR:

- 1) During the Senate Judiciary Committee hearing on the Women's Health Protection Act, Senator Hatch said "I can't imagine why any state legislature would support this no matter their position on abortion." Representative Taylor, as a duly elected representative of the 76th Assembly District of the State of Wisconsin, how do you respond to that statement?

Response:

State legislators do not have the legal authority to pass bills that violate the constitutional rights of the people they represent. As a member of the Wisconsin state legislature, I take an oath to uphold the state and federal constitutions. This obligation does not cease when considering state laws. My primary obligation is to protect the rights and well-being of my constituents, not to fortify the powers of the state legislature in passing laws that discriminate and violate people's rights. That is why I am a strong supporter of the Women's Health Protection Act.

When one in three women will have an abortion in her lifetime, it is clear that access to safe and legal abortion care is essential to the health and safety of my constituents. As global research clearly indicates, as well as our own prior history, when abortion is inaccessible or illegal it does not end. It just becomes dangerous. Illegal, unsafe abortion is one of the greatest causes of maternal death throughout the world.

The women in my state deserve to exercise the same constitutional rights as women in Illinois, Minnesota, or anywhere else in the United States. Yet some politicians in my state who support medically unnecessary restrictions like forced ultrasounds and hospital admitting privileges for abortion providers, are working overtime to deny women their constitutional right to make their own personal, private health care decisions. This is unacceptable, and it is my obligation to vocally oppose these efforts. That is why women in Wisconsin and throughout our country need the Women's Health Protection Act.

- 2) As a state legislator, what is your view on the appropriateness of a federal law that would prevent states from enacting laws that undermine access to abortion services?

Response:

It is not only appropriate, but desperately needed as abortion access is restricted to the point of not being accessible in communities and states throughout our country.

It is disheartening that in 2014, women are still struggling to have comprehensive access to reproductive health care. We seem to be having the same battles that our mothers and grandmothers spent generations fighting. It is indeed unfortunate that federal action is necessary

to protect the health and constitutional rights of women in so many states across the country. Not only does a woman's right to make pregnancy decisions currently depend on her zip code, but too often it depends on the day. With new restrictions continually being passed in state legislatures throughout the country, and a plethora of pending lawsuits as a result, it is becoming difficult for women to know what hoops they must jump through, and where they must travel, to access abortion care in their communities and state.

- 3) Oklahoma State Representative Doug Cox, a former Emergency Room physician, recently wrote an op-ed on the Republican Party's current view of women's health care. Representative Cox lamented his party's view of abortion, stating "What happened to the Republican Party that I joined? The party where conservative presidential candidate Barry Goldwater felt women should have the right to control their own destiny?... What happened to the Republican Party that felt government should not overregulate people until (as we say in Oklahoma) 'you have walked a mile in their moccasins?'" Today, State Representative Cox is an anomaly in his party. Representative Taylor, in your opinion, why should a woman's right to make her own health care decisions not be a partisan issue?

Response:

Decisions concerning child bearing are the most personal, private decisions a woman makes in her life. It should not be the business of politicians. In many countries, abortion is appropriately not treated as a political issue, but rather, as a health care issue.

As a woman who has experienced multiple miscarriages and a high-risk pregnancy, my family and I had to make many personal decisions about child bearing. We were in the position to have the best understanding about our personal circumstances. My state representative and state senator were not.

Women choose abortion because of a variety of circumstances. For some women, they are not ready for parenthood. The decision may be influenced by a woman's financial situation, her relationships, or her educational and/or career situation, in addition to many other factors. Not all pregnancies are the same, and there is a story behind every one of these personal, private decisions. Women of all backgrounds, religious affiliations, and political philosophies choose abortion.ⁱ A woman's pregnancy decision isn't determined by her political party, and her ability to make these decisions should not be determined by ours.

As state legislators, our job is to uphold every person's constitutional rights. Supporting access to legal abortion means that we recognize that a woman who chooses to end a pregnancy—for whatever reasons—deserves safe, professional, accessible medical care. That should be something on which we can all agree. State Representative Cox is right: as elected officials, we should never try to make the most personal, private decisions for anyone else—we haven't walked in their shoes. Interfering in these decisions is government at its biggest and most intrusive.

ⁱ http://www.guttmacher.org/pubs/fb_induced_abortion.html