



# Single Payer Healthcare and Reproductive Justice

CONNECTING THE DOTS

# What is Reproductive Justice?

*“The human right to maintain personal bodily autonomy, have children, and not have children, and parent the children we have in safe and sustainable communities.”*

- SisterSong

Reproductive Justice is...

- A human right
- About access, not choice
- Not only about abortion

# Reproductive Justice is...

- ▶ “the complete physical, mental, spiritual, political, economic, and social well-being of women and girls, and will be achieved when women and girls have the economic, social and political power and resources to make healthy decisions about our bodies, sexuality and reproduction for ourselves, our families and our communities in all areas of our lives.” ([Asian Communities for Reproductive Justice, 2005](#))



# The War on Reproductive Rights

## Roe v. Wade

- 1973 Supreme Court decision legalizing abortion in the US by 7-2 majority
- Trimester framework
  - **First trimester:** the right to an abortion was absolute and the state had no right to restrict it in any way.
  - **Second trimester:** the state could regulate abortion only in the interest of protecting the health of the birthing person
  - **Third trimester:** the state had the right to restrict or ban abortion as long as there was an exception to preserve the health or life of the birthing person.

# The War on Reproductive Rights

## Planned Parenthood v. Casey

- 1992 Supreme Court decision upholding Roe but allowing the State to restrict abortion as long as it does not pose an **“undue burden”** by 5-4 majority
- “Undue burden” = having “the purpose or effect of placing a substantial obstacle in the path of a woman seeking an abortion of a nonviable fetus”
- Post-viability, the State is free to restrict or completely ban abortion, so long as there are exceptions to protect the woman’s life or health

# The War on Reproductive Rights

**Hyde Amendment** - bans the use of federal Medicaid funds for abortions, except in cases of life endangerment, rape, or incest

- Introduced in 1976 with bipartisan support
- A “rider” on congressional appropriations, has consistently passed each year as a part of the annual Labor-HHS [Health and Human Services] appropriations bill
- Approximately 1/4 of women who would have had Medicaid-funded abortions instead give birth when this funding is unavailable



# The War on Reproductive Rights

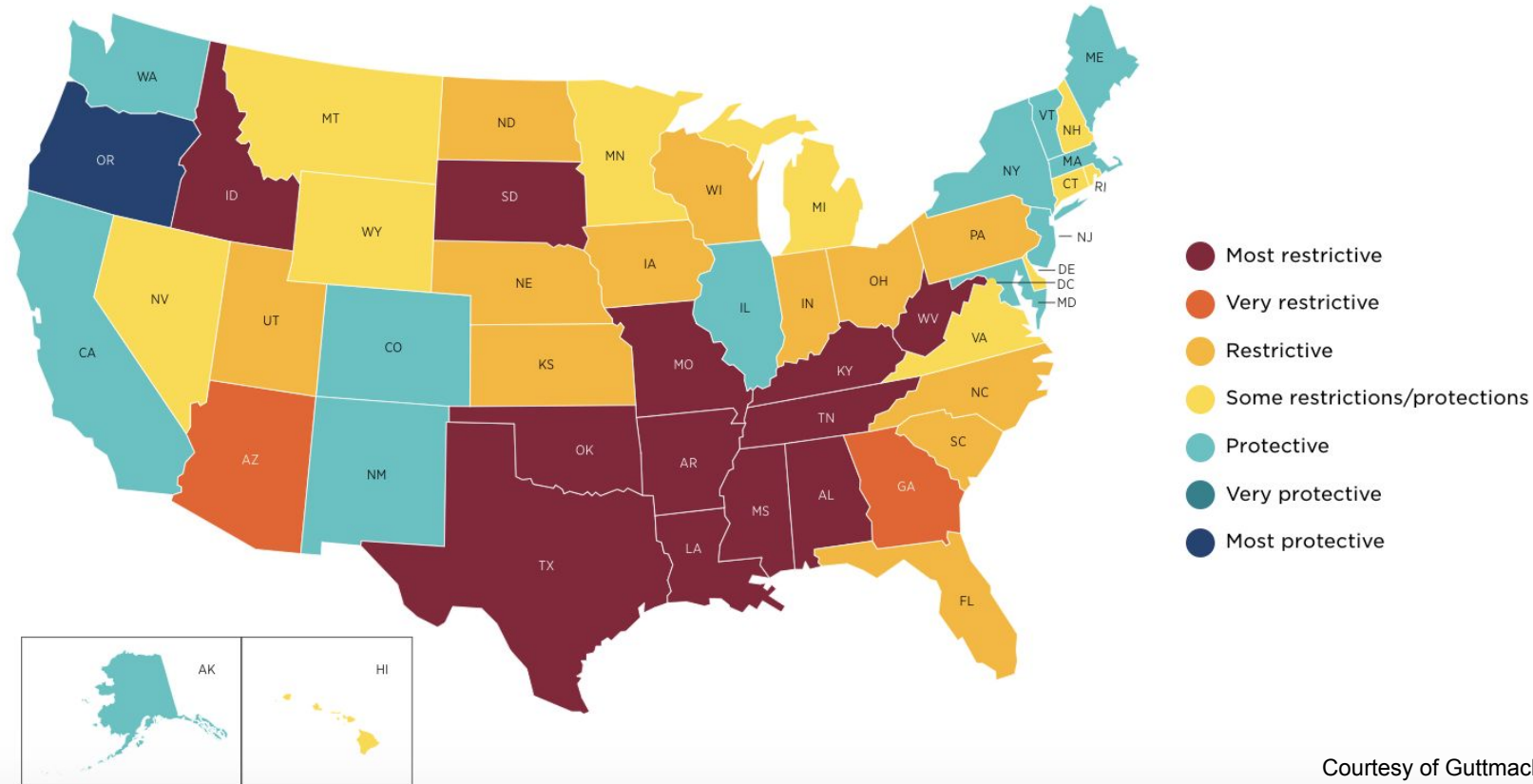
## Dobbs v. Jackson Women's Health Organization

- “Gestational Age Act” → Mississippi law passed in 2018 that prohibits all abortions after 15 weeks gestation with few exceptions
- Jackson Women's Health filed in federal district court challenging the law and requesting a temporary restraining order
- District court and 5th Circuit Court of Appeals ruled 15wks cannot be proven as viability, not consistent with precedent, sent to Supreme Court
- The Supreme Court's conclusion: The constitution does not confer the right to abortion. Roe v. Wade, Planned Parenthood v. Casey overruled.

# Interactive Map: US Abortion Policies and Access After Roe

The abortion landscape is fragmented and increasingly polarized. Many states have abortion restrictions or bans in place that make it difficult, if not impossible, for people to get care. Other states have taken steps to protect abortion rights and access. To help people understand this complex landscape, our interactive map groups states into one of seven categories based on abortion policies they currently have in effect. Users can select any state to see details about abortion policies in place, characteristics of state residents and key abortion statistics, including driving distance to the nearest abortion clinic.

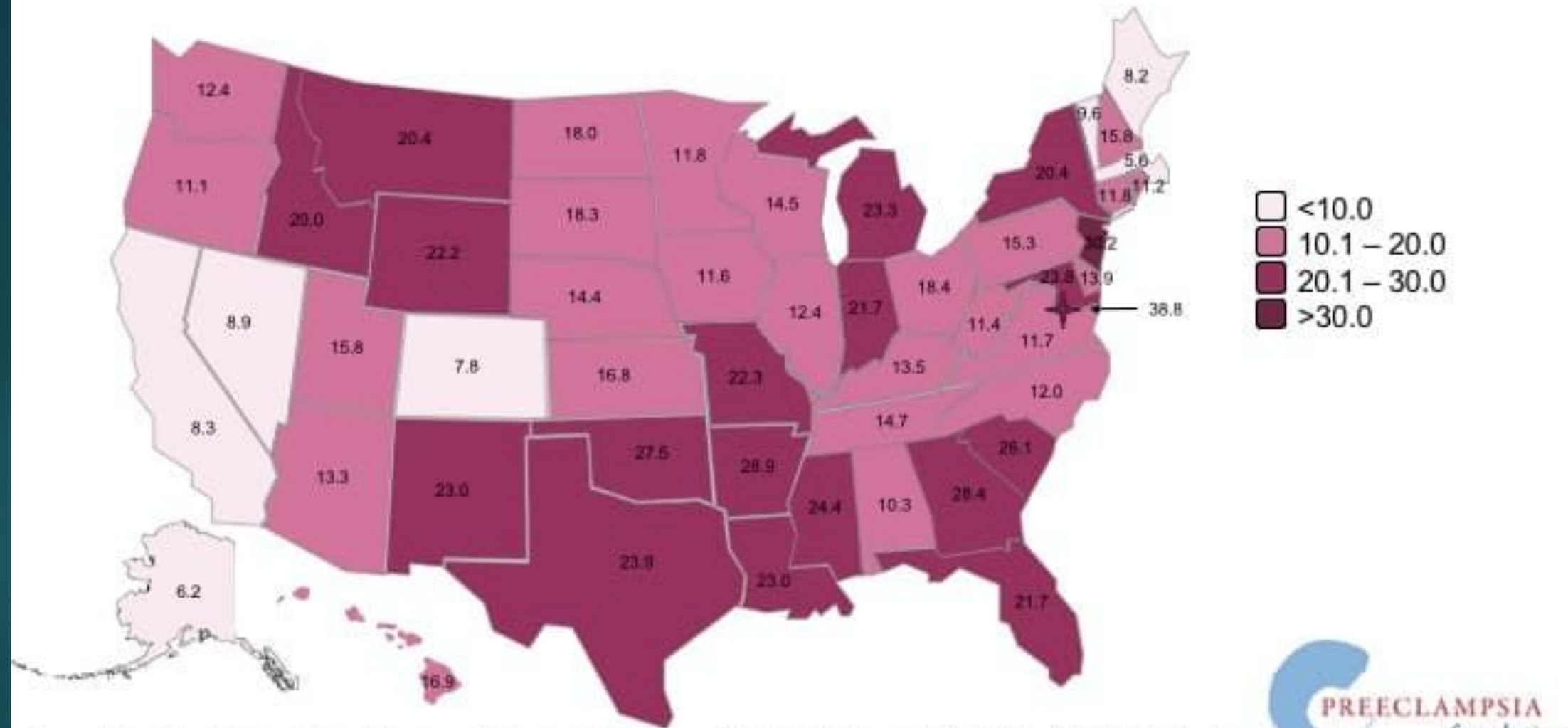
The map reflects state policies in effect as of October 30, 2022.

[FAQ](#) | [Methodology](#) | [Contact Us](#)

Courtesy of Guttmacher Institute



# Maternal Mortality Ratio per 100,000 Live Births, 2005-2014



Source: Moaddab, et al. "Health Care Disparity and State-Specific Pregnancy-Related Mortality in the United States, 2005–2014", *Obstet Gynecol* 2016;128:869–75.

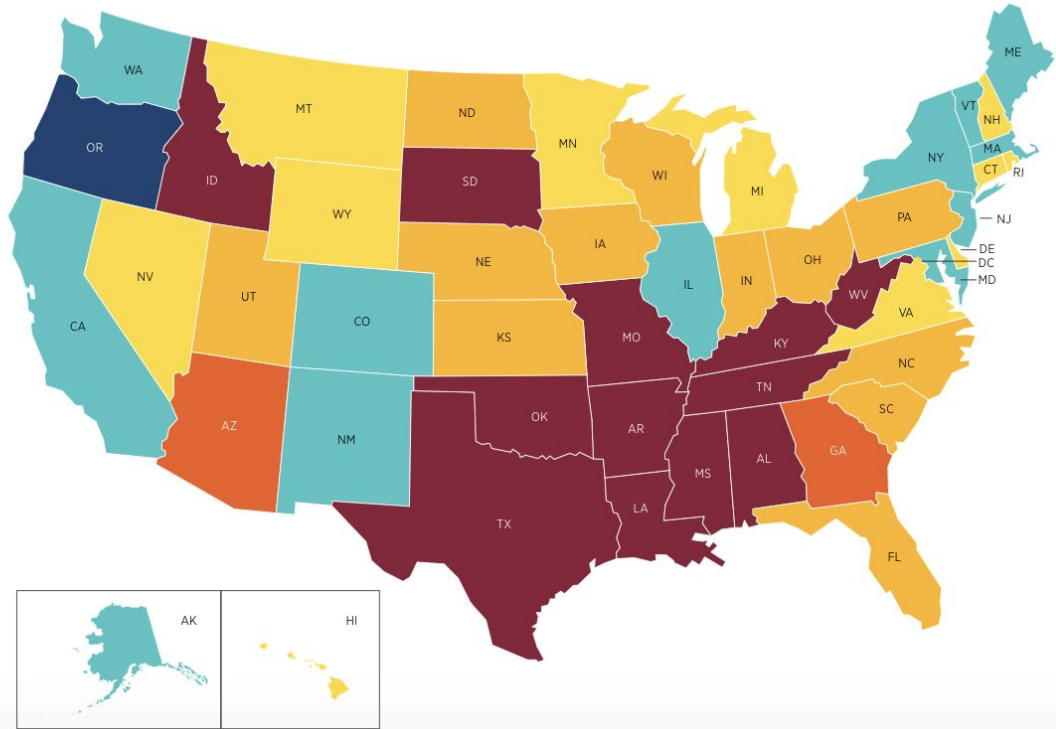


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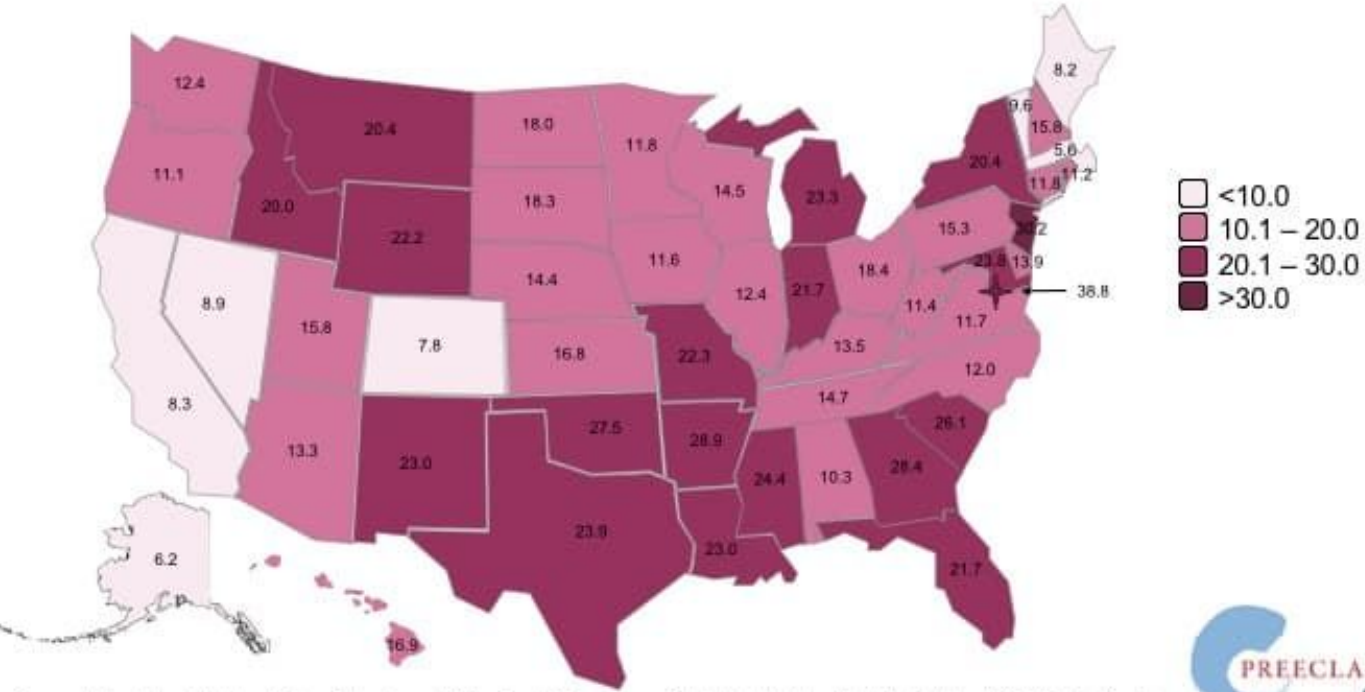
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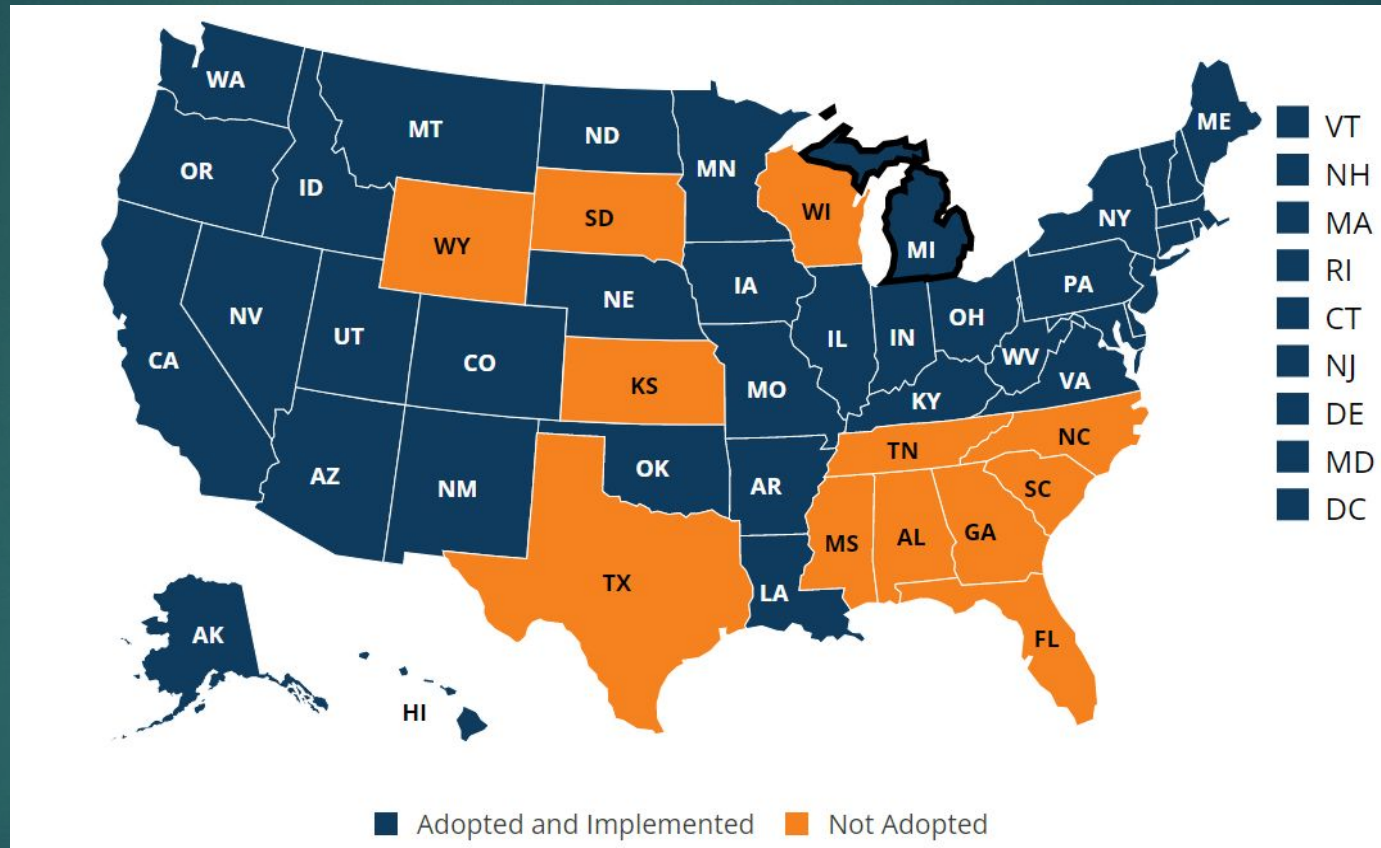


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# Medicaid expansion states





# Medicare for All and Reproductive Justice

**PNHP:** *“Under a single-payer system, all residents of the U.S. would be covered for all medically necessary services, including doctor, hospital, preventive, long-term care, mental health, **reproductive health care**, dental, vision, prescription drug and medical supply costs.”*

**All aspects of reproductive care are essential healthcare.**

# Medicare for All and Reproductive Justice

*“Guaranteeing health insurance to all would **enhance women’s economic independence** because health care would no longer depend on employment or marital status.” -Jenny Brown*



- Full coverage of well-woman visits, prenatal care visits, and delivery
- Coverage for all FDA-approved forms of birth control
- No out of pocket cost for abortion services

# Medicare for All and Reproductive Justice

## Medicare for All Act of 2021: Coverage of Reproductive Care

- “Individuals enrolled for benefits under this Act are entitled to have payment made...for the following items and services...: **comprehensive reproductive, maternity, and newborn care**”
- Will override the Hyde Amendment, removing the ban on federal funding of abortion
- “Abortion” and “infertility” not included in bill text



# Hyde Amendment: forbids federal funding for abortion care

- ▶ HR 1976, The Medicare for All Bill of 2021 contains the following wording:

The bill includes on page 100 in Title VII Sec. 701 (b) (3) the following “(3) RESTRICTIONS SHALL NOT APPLY.

**—Any other provision of law in effect on the date of enactment of this Act restricting the use of Federal funds for any reproductive health service shall not apply to monies in the Trust Fund.”**

# Single Payer = Health Justice = Reproductive Justice

- ▶ We must demonstrate to Social Justice allies our solidarity with their movements
- ▶ No area of healthcare where racial inequity is more prevalent and harmful than women's reproductive healthcare
- ▶ Our current system perpetuates racial, gender and economic injustice
- ▶ A healthcare system run on the profit motive of private insurers will never correct these inequities

# Making connections

- ▶ Racism
- ▶ Sexism
- ▶ Classism
- ▶ Everybody in, Nobody out!
- ▶ Reproductive healthcare included; Hyde amendment repealed
- ▶ Free at the point of service
- ▶ Publically funded, privately delivered



Single Payer could be the best  
anti-poverty, anti-racist,  
pro-women policy we could come  
up with

IT'S ALSO CONSISTENT WITH THE REPRODUCTIVE JUSTICE MOVEMENT

# We have some work to do!

- ▶ Acknowledge past mistakes and injustices
  - ▶ Pro-Choice movements did not give voice to women of color
    - ▶ Pro-choice is for those who have choices
    - ▶ Insufficient attention to repeal of Hyde Amendment
  - ▶ History of reproductive healthcare in the US is filled with examples of injustice
    - ▶ Forced sterilization of women of color
    - ▶ Contraception as punishment
    - ▶ Inadequate safety net for maternal and child health
- ▶ Single Payer movements need to embrace Reproductive Justice as a founding principle

# Man as the default human – implications for women's health

- ▶ In the third century BCE, [the philosopher Aristotle](#) described the female body as the inverse of the male body, with its genitalia “turn’d outside in.”
- ▶ From automobile crash test dummies to animal studies which use exclusively male animals to randomized clinical trials with all or majority male participants, results have been presumed to be applicable for women to the detriment of our health
- ▶ In 1993 National Institutes of Health required the inclusion of women & ethnic & racial minorities in clinical research studies though recent studies demonstrate limited change

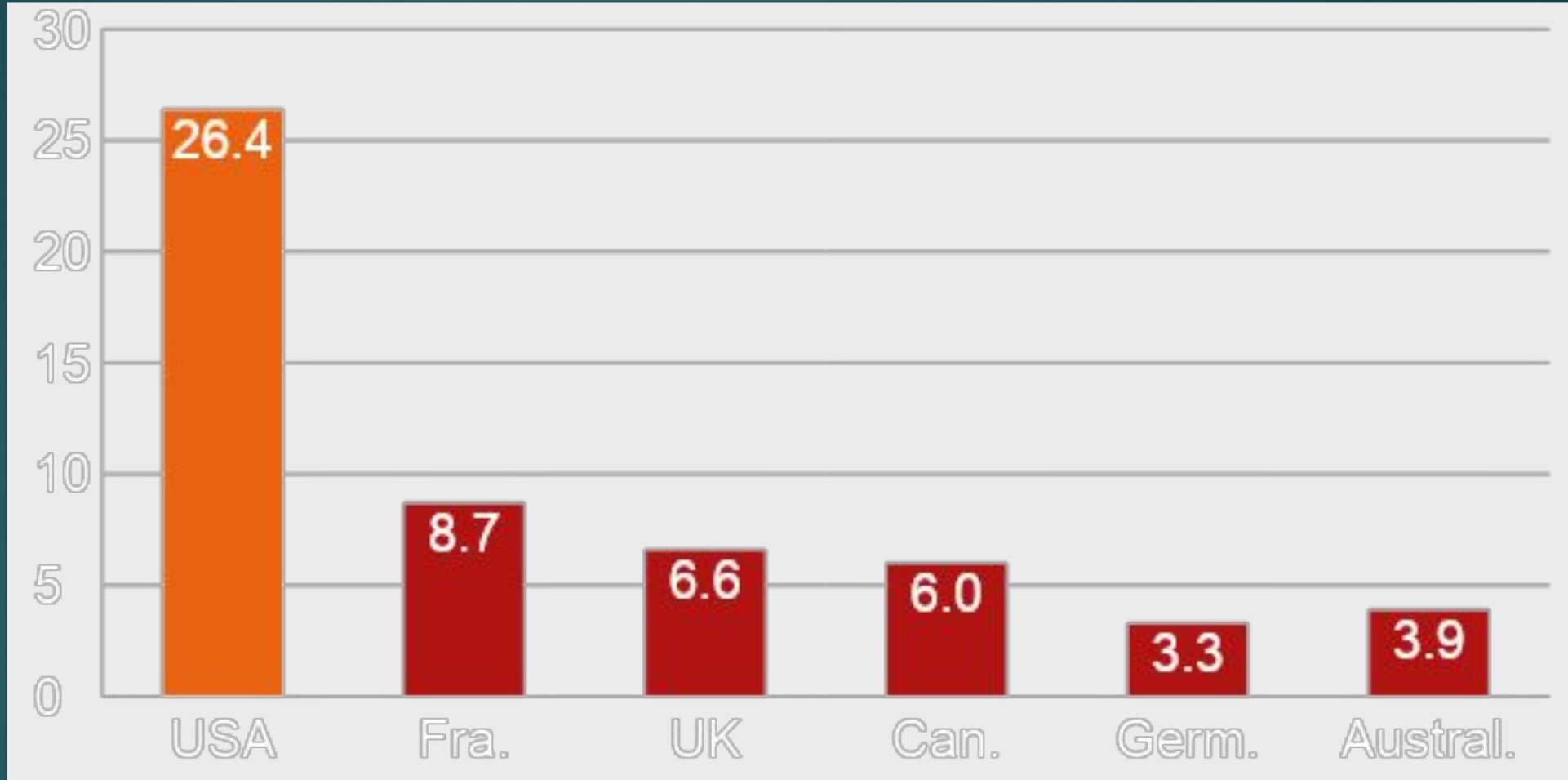


# Revisiting our medical history & understanding echoes persist in practice

- ▶ Demonization of midwifery
- ▶ “Father of modern gynecology” James Marion Sims experimented on enslaved black women without anesthesia
- ▶ Flexner report revisited – a tool to limit medical profession to privileged (wealthy) white men by eliminating schools that trained women & black men
- ▶ Women have been disempowered relative to their own health

# Maternal Mortality

Deaths per  
1000 Live  
Births

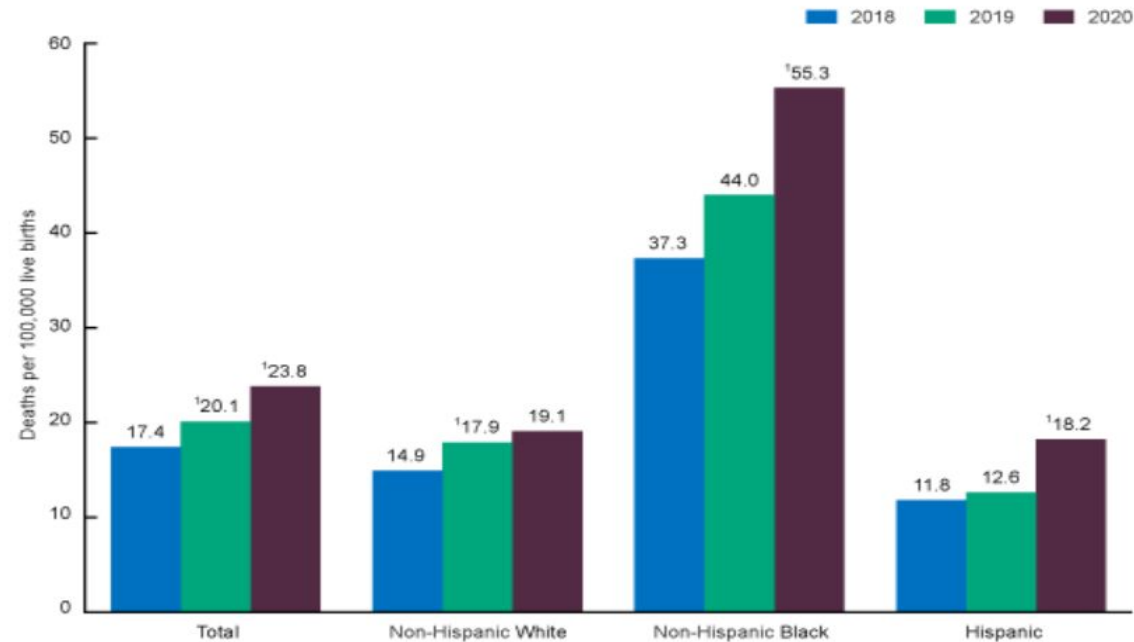


OECD, 2017 and Global Burden of Disease, 2015

Note: Data are for 2016 or most recent year available

# Maternal mortality by race

Figure 1. Maternal mortality rates, by race and Hispanic origin: United States, 2018–2020



<sup>1</sup>Statistically significant increase in rate from previous year ( $p < 0.05$ ).

NOTE: Race groups are single race.

SOURCE: National Center for Health Statistics, National Vital Statistics System, Mortality.



# Medicaid coverage of Maternity and Reproductive Care

- ▶ Eligibility!
  - ▶ Means testing means filling out applications and waiting for approval
  - ▶ Undocumented immigrants are not covered
  - ▶ Inadequate post-partum and intra-partum care
  - ▶ 6% of pregnant women in the US receive no or little pre-natal care
- ▶ Hyde Amendment restricts abortion coverage by federal programs
  - ▶ **Medicare for All bills have provisions to repeal the Hyde Amendment**

# Women with employer-sponsored insurance: Out-of-Pocket Spending for Maternity Care



Data source: Moniz MH, Fendrick AM, Kolenic GE, Tilea A, Admon LK, Dalton VK. Out-Of-Pocket Spending for Maternity Care Among Women With Employer-Based Insurance, 2008–15. *Health Affairs* 2020;39(1):18–24.

# Pregnancy: Unaffordable *and* Unavoidable

June 24, 2022 Dobb's v. Jackson Women's Health  
Organization



## For Immediate Release

Wednesday June 29, 2022, 2:05pm EDT

### Patriotic Millionaires

#### Contact

Sam Quigley, [sam@patrioticmillionaires.org](mailto:sam@patrioticmillionaires.org)

#### PRESS RELEASE

# SCOTUS Dobbs Decision Will Create a "Reproductive and Economic Apartheid"

"At a time when so much of our society and economy are separating into haves and have-nots, this decision ensures that the latter group will continue to fall further behind."



# Predicted consequences of the Dobb's decision: when the state prioritized the fetus over the autonomy of the pregnant woman

- ▶ Increased maternal mortality
- ▶ Catastrophic neglect in treating ectopic pregnancies, miscarriages, severe pre-eclampsia in pre-term pregnancies and medically complex gestations—all conditions where treating the complication requires removing the fetus, and failure to do so could result in the death of the mother
- ▶ State interference in fertility treatment involving the creation of embryos (IVF)

# To Achieve reproductive Justice, we must...

- ▶ Analyze power systems; gendered, racialized and sexualized reproductive politics must be eradicated
- ▶ Address intersecting oppressions
- ▶ Center the most marginalized. Our society won't be free until the most vulnerable people are able to access the resources and full human rights to live self-determined lives without fear, discrimination or retaliation.
- ▶ Join together across issues and identities

Excerpts from [Sistersong.net/reproductive-justice](http://Sistersong.net/reproductive-justice)



# Challenges to partnering with Reproductive rights/justice groups

- ▶ Corporate sponsors, party politics
- ▶ Fears that Single Payer system, publically financed, will be susceptible to change as political winds shift
- ▶ Single payer advocates have not traditionally embraced repro rights/justice as a founding principle

# Let's brainstorm

- ▶ Letter writing campaign—National groups
- ▶ Find local groups to support
- ▶ Target education projects
- ▶ ACOG support of M4A
- ▶ Others??

PUBLIC HEALTH DEMANDS REPRODUCTIVE JUSTICE

# REPRODUCTIVE JUSTICE RALLY 2022



*Fight for Reproductive Rights!*

Stand united with your sisters as we continue to fight for justice,  
safety, and dignity for all women and families.



NOV 6 | 1PM TO 2PM  
SEAPORT CONVENTION  
CENTER ENTRANCE  
415 SUMMER STREET, BOSTON

Join public health workers from your  
state at the 150th Annual Conference  
of the American Public Health  
Association (APHA).

Protest the Dobbs decision!

Wear green in solidarity with Latin and South American women fighting for abortion rights.

Endorsed by multiple APHA sections and caucuses (Maternal Child Health, Medical Care, Black, Women's, Peace, LGBT, Socialist, and others), Massachusetts Planned Parenthood, Public Health Awakened, HMS Students for Choice, Physicians for National Health Program, Boston DSA Healthcare Working Group