



**TESTIMONY OF:**  
Erin Ryan  
Managing Director  
The Ohio Women's Public Policy Network

**IN OPPOSITION OF:**  
House Bill 258  
Senate Health, Human Services & Medicaid Committee

Chairman Burke, Vice-Chair Beagle, Ranking Minority Member Tavares, and distinguished members of the Senate Health, Human Services & Medicaid Committee, thank you for the opportunity to testify today in opposition to Ohio House Bill 258.

My name is Erin Ryan and I serve as the Managing Director of the Ohio Women's Public Policy Network (WPPN), a coalition of more than 30 organizations working collaboratively to promote policies that create economic security for women and strengthen families. In order to make a meaningful impact, we believe that lawmakers must advance public policies centered in equity, fairness, and justice that addresses the following issue areas:

1. Promoting an economic security agenda for women and their families;
2. Ensuring fairness and opportunity in the workplace; and
3. Improving women's health and well-being

These shared goals guide our work as a coalition and have shaped our interest in testifying today against House Bill 258. The passage of this legislation stands in fundamental opposition to our mission to provide women with the opportunity to lead economically secure, safe, and healthy lives, and we strongly urge the committee to vote against the bill.

Since 2011, the Ohio legislature has passed more than 20 restrictions to reproductive health and abortion access, and a total of 20 of them have been enacted into law. These medically unnecessary – and often unconstitutional – restrictions have chipped away at the accessibility and affordability of obtaining an abortion in Ohio, creating new hurdles for women to access abortion care. With the passage of each new restriction, politics and ideology have been put ahead of women's health and lives, and Ohio House Bill 258 is no exception.

House Bill 258 would ban abortions after a detectable fetal heartbeat, as early as six weeks into a pregnancy – at a time before many women even *know* that they are pregnant. By doing so, this bill would essential ban abortions in Ohio – undermining the health, bodily autonomy, and economic stability of women in our state. To be clear, this ban would not end the *need* for abortions – it would simply enact barriers to safe and legal abortion care in the state. But for

many women, this barrier would be insurmountable, creating unequal access to a constitutionally protected right.

A newly released report found that there has been an increase in the number of women in the Midwest crossing state lines in order to access abortion care. The data does not indicate the reason for the out-of-state travel, however, it is likely that unnecessary and costly state restrictions, such as waiting periods and ultrasound requirements, are pushing women to travel to other states with less restrictive abortion laws in order to terminate their pregnancies. Another reason may be that the out-of-state clinic is in fact closer than a clinic based in-state, due to a decline in abortion-providing facilities in states like Ohio.<sup>1</sup> In fact, in 2014, approximately 93% of Ohio counties had no clinics located in them that provided abortions, and more than half (56%) of Ohio women lived in those counties.<sup>2</sup> Since that time, there have been even more restrictions put into place that create additional obstacles for women seeking abortions – and now, House Bill 258 threatens nearly all access to abortion in Ohio.

Again, the passage of this bill would in no way prevent women from needing or wanting abortions. Instead, it would essentially cut off any access to abortion in the state, criminalizing medical professionals who provide the procedure. House Bill 258 would create two options for women seeking an abortion: spend the time, money, and resources to travel out of Ohio to access an abortion in a less restrictive state, or be forced to find other means of ending a pregnancy through an unlicensed, unregulated illegal abortion provider. Both of these options put the health and lives of women in jeopardy, once again playing politics with women’s health care.

The most common reason that women cite for wanting an abortion is because they are unable to afford raising a child, noting that it would interfere with their schooling, work, or caregiving responsibilities. Surveys have found that seventy-three percent of women reported ending a pregnancy for financial reasons. There is a direct link between access to reproductive health care and economic opportunity, and access to abortion is critical to the economic security of women and their families. Abortion has played a significant role in women’s ability to continue their education, stay in the workforce longer and advance in their careers, and care for their families.

The inability to obtain an abortion, due to lack of access or lack of funds, can hinder women’s economic potential and push women into poverty. The connection between access to abortion services and economic security is even more clear when considering the impact on a woman’s life and financial stability if efforts to obtain an abortion are denied. A study of women who sought legal abortions showed that those turned away were three times more likely to live in poverty two years later, compared to women of similar earning potential who were successful in obtaining an abortion.<sup>3</sup> An unintended pregnancy resulting from a lack of birth control or abortion services can upend the financial stability of a family.

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<sup>1</sup> Tribune News Service. “More women are crossing state lines in Midwest for abortion.” *The Columbus Dispatch*. (Chicago). 1 Dec. 2018. Online: <https://www.dispatch.com/zz/news/20181201/more-women-are-crossing-state-lines-in-midwest-for-abortions>

<sup>2</sup> The Guttmacher Institute. (2018). *State Facts About Abortion*. Retrieved, December 3, 2018, from <https://www.guttmacher.org/fact-sheet/state-facts-about-abortion-ohio>

<sup>3</sup> “Two Sides of the Same Coin”. Reproductive Health Technologies Project. Report. August, 2015. Retrieved, December 3, 2018, from <http://rhtp.org/wp-content/uploads/2016/08/Two-Sides-of-the-Same-Coin-Integrating-Economic-and-Reproductive-Justice.pdf>

Despite the often inflammatory and dangerous rhetoric of the anti-choice movement, abortion is a safe and common medical procedure. In fact, abortion is one of the safest surgical procedures for women in the country, with fewer than 0.05% of women obtaining abortions experiencing a complication from the procedure. A recent study from the Guttmacher Institute found that nearly one in four women in the United States will have an abortion in her lifetime.<sup>4</sup>

Sometimes, it is easy to get caught up in the facts and figures, but it is important to remember that behind the data are real people. These are real women who have chosen to obtain an abortion for a number of different reasons: college students who want to continue their education; women who experience a medical complication that makes continuing their pregnancy unsafe; mothers who are financially unable to afford to raise another child; women who have made the decision that is best for themselves and their families.

Again, we strongly urge the committee to vote against House Bill 258. This bill is a direct attack against women's reproductive health care access and economic security. It is cruel, dangerous, and extreme legislation that would have devastating effects on the lives and futures of women in Ohio.

Thank you again for the opportunity to testify. I am available to answer any questions today or by email at [ryan@innovationohio.org](mailto:ryan@innovationohio.org).

Sincerely,

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<sup>4</sup> Ibid (Guttmacher).