



**Testimony of Stephanie Craddock Sherwood,
Executive Director of Women Have Options - Ohio,
Senate Judiciary Committee
Senate Bill 145
June 27, 2017**

Chairman Bacon, Ranking Member Thomas, and members of the Senate Judiciary Committee thank you for the opportunity to testify in opposition to SB 145. My name is Stephanie Craddock Sherwood and I am the executive director of Women Have Options - Ohio, we are Ohio's abortion fund. I am here to testify on behalf of the tens of thousands women whose reproductive health care we have helped pay for and to share how devastating SB 145 will be for those we serve.

I would paint you a picture of who we serve, but no two stories are alike. They come from all corners of the state- they are folks you represent. What they all have in common though is that they need access to safe and legal abortion and they don't have the funds to do it. They need help. These are mostly mothers, who are struggling to raise the children they have. There are many who share their stories of recent job losses, homelessness, or how they are leaving an abusive partner. We hear the stories of many who are trying to recover from drug addiction and need a new start. Many have health issues that prevent them from having a healthy pregnancy.

Abortion bans, like this method ban, won't change the need for abortion access. It just works to set up roadblocks to those who need it most.

We've just recently helped a woman who had to leave Ohio to get the care she needed. At a check-up, they discovered severe complications with her pregnancy and an abortion was deemed necessary by her doctor. The problem was, this patient was just over 20 weeks along in her pregnancy and post 20-week abortions were made illegal in Ohio by this legislature. When abortions are needed later in pregnancy, it's often in very complex circumstances — the kind of situations where a patient and her doctor need every medical option available. But instead, she had to travel to a clinic several states away to obtain the medical care she so desperately needed.

Why else would folks need access to safe abortion after the first trimester? Some women need more time to decide what to do about an unintended pregnancy, or they experience barriers in accessing care because they cannot find a provider in time. Commonly though, it is the folks we serve, someone who is struggling to make ends meet who is delayed in finding the money it takes to get abortion care. Every time she thinks she has the money or has overcome other legal, financial and logistical obstacles to obtaining abortion care, another week has gone by, and the cost of the procedure goes up. This has become worse as medicaid and many insurance plans don't cover the costs of abortion care.

Research shows that the vast majority of those obtaining an abortion during the second trimester would have preferred to have had it earlier.(1) Restrictions, like the one you are considering, are a main reason women encounter delays receiving abortion care. Restrictions that force them to delay abortion care have a disproportionate impact on low-income women, women of color and young women—and is one reason why these groups are overrepresented among women who obtain abortions during the second trimester.(2) A recent Guttmacher Institute study found that needing financial assistance to pay for an abortion and living 25 miles or more from the facility both increased the likelihood of obtaining a second-trimester abortion. (3) By threatening equal access to medical services like abortion, state-level abortion bans only further reinforce the racial and socioeconomic inequality that is already prevalent in our communities.

In closing, many of the women most likely to be impacted by this ban are already facing challenging circumstances. And targeting abortion access is particularly harmful, especially for those who need it most.

We do this work because we believe that people should be able to access abortion no matter their race, socioeconomic status, age, gender identity, or where they live. Every year, hundreds of folks contact Women Have Options seeking help funding their abortion, and they tell us the stories of their hopes and dreams, they tell us about their families—or the families they hope to have one day. Their abortion helps them stay in school, care for their families, and live their best lives. On behalf of these Ohioans, I urge the committee to vote against this bill.

1. Finer LB et al., Timing of steps and reasons for delays in obtaining abortions in the United States, *Contraception*, 2006, 74(4):334–344, https://www.guttmacher.org/sites/default/files/pdfs/pubs/2006/10/17/Contraception74-4-334_Finer.pdf.

2. Jones RK and Finer LB, Who has second-trimester abortions in the United States? *Contraception*, 2012, 85(6):544–551, [http://www.contraceptionjournal.org/article/S0010-7824\(11\)00625-1/fulltext](http://www.contraceptionjournal.org/article/S0010-7824(11)00625-1/fulltext).

3. Jones RK and Jerman J, Characteristics and circumstances of U.S. women who obtain very early and second-trimester abortions, *PLoS ONE*, 2017, 12(1), e0169969, <http://dx.doi.org/10.1371/journal.pone.0169969>.