



TO: Ohio House of Representatives, Health Committee c/o Chair Derek Merrin

FROM: Danielle Smith, MSW, MA, LSW, Executive Director

DATE: April 1, 2019

RE: Testimony in opposition of Sub. SB 23

My name is Danielle Smith, and I write today as the Executive Director of the Ohio Chapter of the National Association of Social Workers Ohio Chapter (NASW). NASW is the largest membership organization of professional social workers with 150,000 members nationwide and over 4,000 in Ohio. NASW promotes, develops, and protects the practice of social work and social workers. NASW also seeks to enhance the well-being of individuals, families, and communities through advocacy.

NASW Ohio Chapter offers the following testimony in opposition of SB 23. Social workers are often on the front lines with clients as they fight to keep enough food on the table, gain access to needed medications, keep their home heated, cope with mental health issues, and many other barriers that stand between a person and their full potential. Our positions are guided by our professional Code of Ethics which states that “social workers respect and promote the right of clients to self-determination.” Self-determination is freedom. A person should, without government interference and regardless of their income or where they live, be able to make the decisions about their own reproductive and sexual health. Whether and when to have children is a private, personal decision and in recognition of this and the right to self-determination, all reproductive services should be available, including contraception, abortion, preventative services, comprehensive sexuality education and support should someone choose to parent or seek an adoptive parent for their child. These services must not be available only to some but must be economically feasible and geographically accessible.

### **What’s Needed is Prevention**

We believe that the intention of this proposed legislation is to bring the number of abortions in Ohio to zero, but social workers often see first-hand the disconnect between legislative intent and the unintended consequences for our clients. This law will not prevent anyone from ending their pregnancies. The consequences will fall disproportionately on families with low-incomes, lack of transportation, and limited healthcare access. Funding pregnancy prevention and sex education would be a much more humane and effective approach. Though prevention and education, not criminalization are what could decrease the need for abortions, Ohio has just served notice of defunding to Ohio’s crucial Planned Parenthood clinics. We are moving in the wrong direction.

Should this committee seek to decrease unintended pregnancies and subsequent abortions, the following are the policies to promote:

1) **Make contraception accessible.**

Facilitate access to all forms of contraception by ensuring privately and publicly-funded health insurance coverage that includes access to all forms of contraception.

2) **Ensure access to emergency contraception for rape survivors.**

Ensure that those who have been sexually assaulted have access to emergency contraception immediately. Rape survivors deserve the security and choice of not becoming pregnant as a result of their rape regardless of where they end up receiving care. Access should be uniform across the state.

3) **Adequately fund and reduce barriers in systems of child welfare and adoption.**

To make adoption a genuine alternative to abortion or parenting, review public and private adoption services to ensure they address the needs of birth parents and end discrimination against adoptive parents based on sexual orientation or gender expression. Ohio's child welfare system is currently overwhelmed with children needing placement, yet we have the lowest state investment in child welfare in the nation (Public Children Services Association of Ohio Fact Book, 2018).

4) **Require comprehensive sex education.**

Give our teens the information they need to protect themselves against sexually transmitted infections and unintended pregnancies by providing age-appropriate, culturally-sensitive sexuality and reproductive health education programs. As social workers, we face the reality of our clients' situations every day, and you should too. The reality is that teens are having sex and a large percentage of these teens are not using contraception. Our children deserve access to information needed to protect their health.

We want to remind you that many Ohioans are struggling to meet their basic needs. According to recent statistics from the Center for Community Solutions, one in five children are living in poverty and 12% of Ohioans receive SNAP benefits. One in four Ohioans are enrolled in Medicaid. Food pantry lines are growing, and homeless shelters are full. These are the problems that deserve your full-attention and effort, in addition to efforts to promote self-determination and make pregnancy prevention affordable and accessible. We owe this to our children and families. Thank you for your time and attention.

Respectively submitted,

**Danielle Smith, MSW, MA, LSW, CAE**

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