

League of Women Voters of Nashville

Position Paper on Access to Comprehensive Reproductive Services

August 23, 2022, updated October 31, 2022

Since 1993, the League of Women Voters has actively supported health policy solutions to contain costs and ensure quality, affordable health care for all, including comprehensive reproductive health services.¹ The League supports the right of all citizens to make their own reproductive choices, and believes that reproductive choice is not only a critical issue affecting the rights of women and all who may become pregnant, but one of racial and economic justice.² Overturning reproductive rights will disproportionately harm Black, Brown, and low-income people who are most impacted by systemic inequalities.³

On June 24, 2022, the U.S. Supreme Court voted to overturn *Roe v. Wade*, a landmark decision in place for nearly 50 years that balanced the reproductive rights of women with the right of a viable fetus to be born. The Court's decision in *Dobbs v. Jackson Women's Health Organization* disregarded what most constitutional scholars had considered settled law and ruled that reproductive choices in early stages of pregnancy no longer belong to women living in the U.S. but are now the purview of state legislatures.

The LWV of Nashville (LWVN) stands with the national League in calling for the federal government to ensure restrictions on reproductive rights are reversed and that government programs and policies advance reproductive justice. However, we are gravely concerned that this will not happen in time to avert serious consequences for thousands of Tennessee women and their families. Due to state legislation passed between 2019 and 2021 and triggered by *Dobbs*, as of August 25, 2022 all abortions performed in Tennessee—even those considered medically necessary or sought in cases of child abuse, rape or incest, or severe fetal abnormality—are now considered criminal acts. Our state law no longer recognizes the mental health of pregnant women as a valid medical concern. Providers of obstetrical, gynecological and emergency medicine who intervene in a pregnancy at any point following conception are subject to felony prosecution unless they can prove in court that they acted to prevent the death or irreversible impairment of a bodily function of the mother.

The LWVN calls on our Governor and the General Assembly to repeal the state's total abortion ban. This ill-conceived legislation unnecessarily deters and delays needed healthcare for thousands of women, children, and families across our state. Tennessee currently ranks 46th lowest among the 50 states in quality, cost, and access to women's health care,³ 11th worst in maternal and fetal mortality rates,⁴ and 8th worst in childhood poverty.⁵ Black women in our state are 2.5 times more likely to die from pregnancy-related causes than White women, and pregnant persons with disabling health conditions face the highest mortality disparities.^{6,7} Women living in rural communities often have no or limited access to obstetrical care.⁸ Tens of thousands of Tennesseans of reproductive age who are living below the poverty level are currently denied access to preconception and contraceptive healthcare due to our state's refusal to expand Medicaid. Policy makers need to focus on making it possible for every family to raise children safely, healthfully, and not in poverty. This includes not only expanding access to health care but also guaranteeing affordable childcare and housing, a living wage, safe schools, and supportive social environments for families.

Until a national right to reproductive choice is codified in law, the LWVN will work to repeal Tennessee's total abortion ban and oppose any abortion law which criminalizes medical interventions or denies exceptions for protecting the life, bodily function, and mental health of pregnant persons, or in cases of child sexual abuse, rape, incest or severe fetal abnormalities.

Summary of LWVN Recommendations to Protect and Improve the Reproductive Health of Tennesseans

Restore Reproductive Health Access:

- Decriminalize provision of medically necessary pregnancy terminations
- Allow the medical necessity of intervention in a pregnancy to be determined by a pregnant person and their medical provider, not by the legislature or the courts
- Consider the mental health of the pregnant person in assessing the risk of death and permanent damage to a person's functioning
- Reinstate exceptions for rape, incest, child sexual abuse, and severe fetal abnormalities
- Continue to require TennCare and private health insurance to cover pregnancy terminations to protect the life and health of pregnant women and in cases of rape and incest

Expand Access to Comprehensive Health Services:

- Expand Medicaid/TennCare to cover 300,000-400,000 low-income uninsured Tennesseans excluded from care by our state legislature
- Plan and increase state investment in equitable access to comprehensive health care, including support of rural hospitals and recruitment of primary care, behavioral health, and obstetric care providers to underserved areas
- Provide ongoing support for county and regional health departments to maintain and expand current reproductive services
- Provide TennCare reimbursement of doula and community health outreach workers services to support maternal health and child development

Enhance Health Education:

- Return choice of family life curriculum to local school boards
- Make *Quality Sexual Health Education* as described by the Centers for Disease Control Division of Adolescent Health (CDC DASH) an optional curriculum framework
- Develop certification programs for teachers, school nurses, and other school staff who teach health as a collaborative effort among universities and departments of health and education
- Ensure the TN Department of Education's health education and *Lifetime Wellness* standards are met in all grades
- Improve understanding and trends of health-related risks among TN youth by resuming inclusion of sexual health questions on the Youth Risk Behavior Surveillance Study

Support Programs that Improve Social Determinants of Health:

- Increase access to TANF/ Families First program benefits, including Teen Child Care Assistance for young mothers
- Expand and extend supplemental food assistance and school nutrition programs
- Increase state support of affordable housing initiatives to increase housing stock for low-income families
- Enacting a state minimum wage increase from \$7.25/hour to a living wage
- Improve methods of collecting child support so hiring an attorney is not required to enforce court-ordered child support; and provide state subsidies to bring single-parent families above the poverty level
- Expand access to early childhood and PreK programs, including transportation access
- Enact family leave policies that include provisions for parents to care for sick dependents