..... (Original Signature of Member)

118th CONGRESS 1st Session



Recognizing the importance of intersectionality for abortion access.

IN THE HOUSE OF REPRESENTATIVES

Mrs. WATSON COLEMAN submitted the following resolution; which was referred to the Committee on

RESOLUTION

Recognizing the importance of intersectionality for abortion access.

- Whereas 1 in 4 women in the United States will have an abortion before the age of 45;
- Whereas approximately 22 million women and girls of reproductive age live in States where abortion is heavily restricted;
- Whereas the most common reason to end a pregnancy is due to potential interference with education, work, or the ability to care for dependents;
- Whereas nearly 50 percent of abortion patients have incomes below the poverty level;

- Whereas women living in poverty have a rate of unintended pregnancy that is five times higher than those with middle-class or upper-class incomes;
- Whereas unintended pregnancy remains the most common among poor women, women of color, and women without a high school education;
- Whereas Black women are twice as likely to have an unintended pregnancy than White women;
- Whereas Black women account for 38 percent of all abortions;
- Whereas Black women founded the Reproductive Justice movement in 1994 to address the lack of intersectionality and racial justice in the existing abortion rights movement;
- Whereas Black women are almost three times more likely than White women in the United States to die from childbirth;
- Whereas the risk of dying in childbirth is 14 times higher than the risk of dying from a safe abortion;
- Whereas the impacts of maternal mortality and increasing abortion restrictions are closely related to each other and both rooted in persistent structural racism and sexism;
- Whereas LGBTQI+ individuals experience major disparities in abortion and reproductive care;
- Whereas an estimated 16 percent of individuals having abortions do not identify as heterosexual women;
- Whereas several hundred transgender and nonbinary individuals obtain abortions annually at facilities that do not provide gender-affirming health care;

- Whereas abortion care and gender affirming care are both fundamental to the bodily autonomy of LGBTQI+ individuals;
- Whereas the banning and restriction of abortion around the country has created abortion-provider deserts, where some providers can only offer medication abortion rather than both medication and surgical abortions;
- Whereas medication abortion is the most common form of pregnancy termination and accounts for more than half of all abortions in the United States and increased access to abortions;
- Whereas medication abortion is under threat by antiabortion advocates utilizing junk science; and
- Whereas decisions from the Supreme Court and Federal district courts are threatening to the availability of abortions: Now, therefore, be it
 - 1 *Resolved*, That the House of Representatives—
- 2 (1) recognizes that women of lower socio3 economic standing face the greatest risk when abor4 tion is restricted;
- 5 (2) acknowledges that women of racial and eth6 nic minorities and particularly Black women are at
 7 highest risk when abortion is restricted;
- 8 (3) acknowledges that surgical and medication 9 abortions are safe and any developments in science 10 that affect abortion care should be reviewed by sci-11 entific and medical experts; and

(4) calls upon the Federal Government to pro tect the right to abortion across the country.