

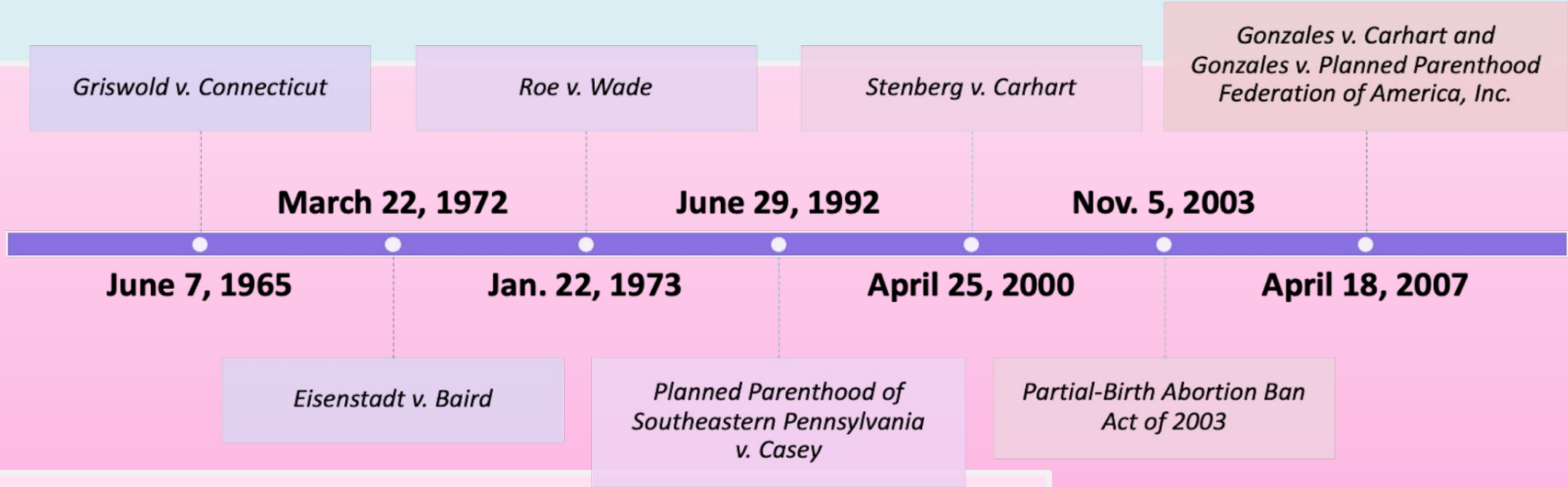
The Floor, Not the Ceiling: *Roe v. Wade* and Public Policy

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Research Question

How has *Roe v. Wade* left an impact on the modern-day abortion landscape in terms of the four principles of public administration?

- What historical circumstances affected today’s climate surrounding abortion policy?
- Looking at the four public administration frameworks, or the managerial, legal, fiscal, and political lenses, what is the impact of this case on abortion policy?
- What are the policy implications of *Roe v. Wade* being overturned?



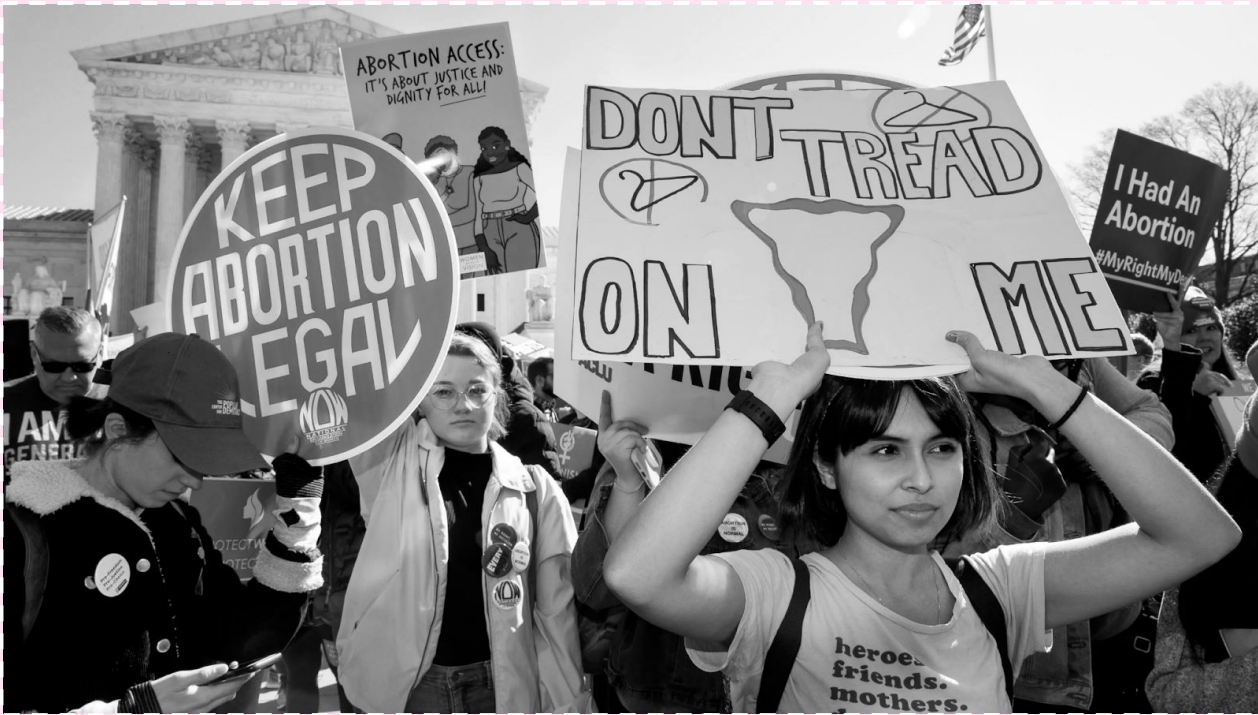
Background

Before *Roe v. Wade*:

- Griswold v. Connecticut (1965)*** - Found that making it illegal for a married couple to use birth control violated that married couple’s right to privacy.
- Eisenstadt v. Baird (1972)***- Found that single people also had the right to contraceptives.

Roe v. Wade:

- Plaintiff wanted to “safely and legally end her pregnancy.”
- Texas (and many states at the time) had a statute that made it a crime to perform an abortion unless the pregnant person’s life was at risk.
- January 22, 1973** - SCOTUS sided with *Roe* striking down the Texas law and ruling that “the constitutional right to privacy ‘is broad enough to encompass a woman’s decision whether or not to terminate her pregnancy.’”
- The right to abortion is protected by the Fourteenth Amendment.
- SCOTUS acknowledged that “the right to privacy is not absolute and that a state has valid interests in safeguarding maternal health and protecting potential life.” This means that a state can “prohibit abortion after viability, except when it is necessary to protect a woman’s life or health.”



Post-*Roe v. Wade*:

SCOTUS found...

- Limits on the ability of low-income women and young women to make the decision to end a pregnancy.
- Federal and state government can’t fund abortion services.
- Planned Parenthood of Southeastern Pennsylvania v. Casey (1992)***- Upheld findings in *Roe v. Wade* and made it harder for women to challenge laws that were anything, but an absolute ban on abortions.
- Gonzales v. Carhart and Gonzales v. Planned Parenthood Federation of America, Inc. (2007)***- Upheld Partial-Birth Abortion Ban Act
 - Federal crime to “take certain steps when performing a second-trimester abortion.”
 - No exception for women’s health.
 - Upheld despite the fact that in the *Stenberg v. Carhart (2000)*, SCOTUS struck down a similar law.
 - Overturns one of *Roe v. Wade*’s key findings: A woman’s health should be the most important factor when creating laws that restrict abortions.

“Abortion access shouldn’t depend on a patient’s zip code.”

“Every single time an abortion ban is put in place, it impacts women of color, disabled women, LGBTQ+, and poor women the most.”

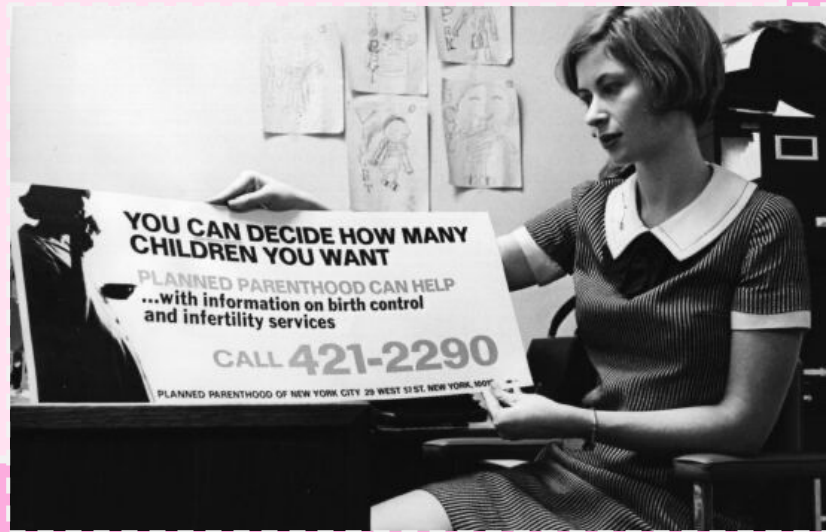
“If *Roe* is eliminated, [it would be a] green light for a lot of states to enact targeted acts of aggression on lots of different communities.”

“In other words, abortion legality is not the same as abortion access, and *Roe* left the door open for anti-s to decimate access in many states using loopholes around “undue burden” for abortion patients.”

“Absolutely, there is increasing restrictions and fear regarding ability to afford abortions and such. Women are confronted with a potential cost that may deter them from seeking a safe abortion that goes on the record, thus leading them to undergo more dangerous procedures.”

Data and Interviews

- Used pre-existing surveys conducted by the Centers for Disease Control and Prevention and other organizations regarding abortion trends post-*Roe v. Wade*.
- Interviewed ten people in the abortion policy field.
 - Experience in Planned Parenthood, Physicians for Reproductive Health, NARAL Pro-Choice America, Washington Area Clinic Defense Task Force, and EMILY’s List.
- Interview questions:
 - Affordability and access to abortion and related healthcare
 - How the federal government can establish national-level protections
 - How the media has impacted the abortion debate
 - Greatest challenge/threat to abortion rights at the national level
 - Outcome this summer
- The qualitative data suggests a negative outlook on the future of *Roe v. Wade*.
- Only one respondent** out of the ten interviewed, said it would not be overturned.
- A common theme throughout our interviews: ***Roe v. Wade* was the floor, not the ceiling of abortion access**, and should have been treated as such.
- Several of our interviewees expressed that **the most effective way to ensure access is to engage directly with the people seeking these services**.
- Our respondents also said that **abortion access needs to be improved** and that, with the possibility of *Roe* being overturned, **finding access will be difficult**.
- The interviewees are concerned that **states will impose more restrictions or barriers if *Roe v. Wade* is overturned**.
- Our respondents hope that the court case this summer will be a “wake-up call” and that people will be more “**proactive**.”
- Finally, many respondents discussed the **importance of education**.
- Organizations such as Planned Parenthood are preparing for the possibility of the court case being overturned this summer.



Policy Analysis

When looking at abortion policy in the United States, it is incredibly complicated.

Federally

- Hyde Amendment - which withholds federal Medicaid funding from abortion nationwide, with extremely narrow exceptions, affecting low-income women.
- Federal Abortion Ban - which criminalizes abortions in the second trimester of pregnancy.

Since *Roe*, states have constructed an intricate web of abortion laws that regulation how, when, at what age, where, etc. a woman may receive an abortion. This web greatly depends by state and must be further evaluated on an individual basis, but can generally be summarized as:

- Physician and hospital requirements
- Gestation limit
- “Partial-birth” abortion
- Public funding and coverage by private insurance
- Right of refusal
- State-mandated counseling

States limits, like we have seen, *disproportionately affect Southern states*, where more Black women reside.

The data collected generally within the abortion discussion does also lack a certain equity when referencing *transgender and nonbinary people* and, because of this, researchers, lawmakers and advocated do not have a full understanding of what abortion looks like for those who may not identify as a woman, but are still becoming pregnant.

The main problem we see here is there are a variety of inconsistent laws that, in many cases, drive women to go somewhere abortion is legal or where there are some guaranteed protections.

Throughout our interview process, we heard many stories of people being turned away or struggling to find abortion and abortion related care. Pliskin says that politics are all about keeping the poor, poor. *Being turned away or not finding the necessary abortion care will keep that cycle and continue to harm the most vulnerable.*

It is a public health, economic and human rights imperative to ensure meaningful access to abortion care is available to all, regardless of their background.

Anti-abortion activists and lawmakers continue to work to undermine *Roe* like in states such as Texas, Oklahoma, Mississippi, and soon to be many more. What happens when people are denied abortions do have lasting effects. And, when abortions are outlawed, it is not as if abortions cease to happen, rather they are forced to go underground and become dangerous, endangering many women economically, mentally, and physically.

Recommendations

At the federal, state, and even personal levels, there are several practical ways to improve women’s access to reproductive healthcare.

Federal

- With the large amounts of variation and increasingly restrictive policies that are being passed on the state level, the Women’s Health Protection Act and repealing the Hyde Amendment would be vital ways for the federal government to establish baseline protections for these important services.
- When asked about ways for the federal government to get involved, nearly half of our respondents agreed that the Women’s Health Protection Act would help to eliminate some of the boundaries that women face and ensure consistent safeguards across the nation.

State and Local

- Voting restrictions—especially on low-income and minority populations—directly impact state and local elections, helping pro-life candidates come to power and allowing them to pass anti-abortion legislation. States however could help to combat this issue by enforcing automatic or same day voter registration, restoring voting rights to previously convicted Americans, or eliminating voter ID requirements.
- Officials on the state level can implement policy that improves education on women’s healthcare services and creates more comprehensive sex education curricula in school. Dr. Curtis specifically discussed the importance of educating the public on how safe and normal performing abortions are, and sufficiently teaching middle and high schoolers about reproductive health.

Personal

- More than half of our interviewees expressed the need to increase focus on local abortion funds instead of large national organizations such as Planned Parenthood. In these organizations, nearly all resources go directly to the women impacted, by funding childcare and travel expenses instead of being tied up in administrative costs.
 - National Network of Abortion Funds is comprised of over 90 grassroots organizations that supported 56,155 people in Fiscal Year 2019—only 26 percent of the 215,573 calls their network received.