2017 SENATE JOINT RESOLUTION 11


Relating to: stating the legislature’s declaration that abortion is health care.

Whereas, the state of Wisconsin is committed to a quality health care system that meets the needs of all of its citizens, and affordable abortion care is an essential component of this health care system. Since about 3 in 10 women will have an abortion in their lifetimes, it is one of the most common medical procedures in the United States; and

Whereas, abortion is one of the safest medical procedures in the United States. Aspiration abortion, for example, causes no complications in 99 percent of cases, and medication abortion causes no complications in more than 99.9 percent of cases, making it safer than Tylenol, aspirin, and Viagra; and

Whereas, abortion has become less accessible. The number of abortion clinics has declined by about 40 percent over the past three decades. Today, almost 90 percent of counties in the United States do not have an abortion provider and 38 percent of women of reproductive age live in those counties. Four states have only one provider and at least ten states have three or fewer providers; and
Whereas, abortion is an essential component of health care because it provides all women the ability to plan and space their pregnancies, which clearly improves women’s physical, psychological, and economic well-being. For example, evidence shows that women who have a wanted abortion are better able to maintain a positive future outlook and achieve their aspirational life plans. Similarly, evidence clearly demonstrates that if a woman seeks an abortion and access is delayed or denied, she is at greater risk of experiencing adverse health and economic outcomes; and

Whereas, abortion is an essential component of health care for women with lower incomes. A five-year examination of the effects of unintended pregnancy on women’s lives by the Advancing New Standards in Reproductive Health research group, known as ANSIRH, found that the main reason women terminate their pregnancies is because they cannot afford to have a child; and

Whereas, abortion is an essential component of health care for women who face medical problems, such as a woman who is diagnosed with cancer in the middle of pregnancy and must make a choice between obtaining an abortion or forgoing lifesaving chemotherapy; and

Whereas, abortion is an essential component of health care for young teenagers who become pregnant, such as a girl who must make a choice between obtaining an abortion or running the risk of enduring severe, lasting damage to her physical health; and

Whereas, abortion is an essential component of health care for women who experience major problems in pregnancy, such as a woman who finds out that her fetus would only live for a few hours past birth and carrying that pregnancy to term might severely damage her ability to bear other children in the future; and
Whereas, the practice of abortion care, like all health care, should be driven by evidence-based standards developed and supported by medical professionals, but instead, patients and providers are required to overcome numerous barriers erected by abortion opponents. These barriers—waiting periods, so-called “counseling” requirements, bans on insurance coverage, limits on who can perform abortions, and laws that are targeted regulation of abortion providers or TRAP laws—are not intended to protect a woman’s safety but are designed to coerce women into giving birth to unwanted children. They serve no purpose other than to make abortion more difficult and expensive; and

Whereas, when abortion opponents argue for onerous regulations and procedures, they are treating abortion care as if it is a separate issue apart from health care, but abortion is, in fact, health care; now, therefore, be it

Resolved by the senate, the assembly concurring, That the Wisconsin legislature is committed to ensuring that:

abortion is recognized as an essential component of women’s health care;

abortion care is made affordable and accessible throughout Wisconsin and integrated into the health care safety net;

state, city, and county health departments promote policies and take steps to increase access to abortion care;

both public and private health insurance covers abortion care;

facilities providing abortion care or health care professionals providing abortion care are not subjected to regulations more burdensome than those imposed on facilities or health care professionals that provide medically comparable procedures;

all qualified health care professionals are able to provide abortion care; and
health care professionals providing abortion care are able to follow best medical
practices developed and supported by scientific evidence.

(END)