

Protecting Reproductive Health Care
Statement by Maine Public Health Association
August 2022

According to the World Health Organization, “health” is not merely the absence of disease or infirmity, but a state of complete physical, mental, and social well-being. Denying pregnant people the right to access safe, timely, affordable, and respectful abortion care harms the physical, mental, and social well-being of all people and denies them the achievement of health. Restricting abortion care access is a direct denial that health care is a human right and that people who are pregnant are recognized as autonomous and free in making decisions about their own health and health care.

Longstanding systems of health and economic inequity – including access to reproductive health care – cause continued and documented disparities in educational achievement, financial security, and social status.¹ Indeed, access to safe abortion services is an essential component of comprehensive reproductive health care; lack of access to abortion care disproportionately impacts individuals living in rural areas, racial and ethnic minorities, adolescents, incarcerated people, and those who are socioeconomically disadvantaged. In Maine, nearly half of all pregnancies are unintended (with a greater percentage among low-income individuals); and of those, approximately 28% end in induced abortions.²

Denying the right to access safe abortion services increases rates of maternal morbidity and mortality. Data show that variations in state-level abortion care access is associated with maternal mortality – in states with more restrictive abortion care access policies (including the denial of Medicaid coverage) there is a higher risk of maternal mortality.³ Securing protection for abortion care at the federal level is needed for ensuring equitable access to care and support services across the U.S.

Forcing a person who is pregnant to carry a high-risk pregnancy to term threatens the life – and quality of life – of the mother and the fetus. For many life-threatening cases, abortion is standard care. Indeed, the wellbeing of people who are pregnant extends beyond the physical state of their pregnancy. It relates to their psychosocial wellbeing, their economic security (including employment and housing security), their privacy, their safety from abuse and discrimination, and recognition of personal autonomy and freedom for making decisions about the factors that influence their health. When people who are pregnant aren’t able to access safe abortion services, they seek them elsewhere, increasing the [risk of harm](#). Conversely, forcing full-term pregnancies when that is not what the person wants, or is safely able to do, strains other community resources, including childcare, education, health care, and social supports and services.

We all want just and fair opportunities to achieve good health and the freedom to make our own choices. Actions that correct health inequities are necessary for some and ultimately good for everyone. In the context of reproductive health care, actions that correct disparities include education about sexuality and health, access to affordable and quality prenatal and postpartum care, paid parental leave and childcare, increased preventive measures and support systems for people living in physically, emotionally, and economically abusive situations, and access to safe, timely, affordable, and respectful abortion care.

Action Steps – MPHA commits to:

- Protecting and supporting reproductive health care access and quality of care for all people, including endorsing [policy recommendations](#) proposed by the American College of Obstetricians and Gynecologists.
- Advocating for Congressional action to pass legislation that immediately protects and advances access to abortion services, ensures access to contraceptives, supports reproductive justice, and removes restrictions on public funding and insurance coverage for legal abortions.
- Fighting all efforts to rollback Maine’s strong reproductive health care laws (in Maine, reproductive rights are recognized and protected at the state level by the [Reproductive Privacy Act](#)), including Medicaid coverage of abortion care.
- Advocating for stronger supports for childcare, caregiver paid leave, telehealth, and fair wages.

¹ National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Population Health and Public Health Practice; Committee on Community-Based Solutions to Promote Health Equity in the United States; Baciu A, Negussie Y, Geller A, et al., editors. [Communities in Action: Pathways to Health Equity](#). Washington (DC): National Academies Press (US); 2017 Jan 11. 3, The Root Causes of Health Inequity.

² Kost K. 2015. [Unintended Pregnancy Rates at the State Level: Estimates for 2010 and Trends Since 2002](#). New York: Guttmacher Institute.

³ Vilda D, Wallace ME, Daniel C, Goldin Evans M, Stoecker C, and Theall KP. 2021. [State Abortion Policies and Maternal Death in the United States, 2015–2018](#). *American Journal of Public Health*, 111:1696-1704.