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Hearing before the U.S. Senate Committee on Health, Education, Labor, and Pensions
“The Assault on Women’s Freedoms: How Abortion Bans Have Created a Health Care
Nightmare Across America”
June 4, 2024

Thank you, Chair Sanders, Ranking Member Cassidy, Senator Murray and the members of the Committee for the opportunity to highlight the clear and growing evidence that the *Dobbs* decision is harming reproductive health and freedom. My name is Destiny Lopez, and I am the acting co-CEO of the Guttmacher Institute, a leading research and policy organization committed to advancing sexual and reproductive health and rights worldwide.

For decades following the 1973 *Roe v. Wade* decision, anti-abortion advocates worked strategically to make abortion harder to get and highly stigmatized. Public support for abortion’s legality has remained high and consistent. But the sheer number of state-level abortion restrictions ensured that abortion became inaccessible for many—even with *Roe* in place.

The *Dobbs v. Jackson Women’s Health Organization* decision was an inflection point, unleashing chaos and fear across the nation. Our experts are constantly assessing this changing landscape and the increasingly robust body of evidence that illustrates the harms caused and exacerbated by *Dobbs*. Two years after the decision, here is what we know:¹

Access to abortion care is severely restricted in many parts of the country. Fourteen states are now enforcing total abortion bans with very limited exceptions, and many more have other new restrictions in place. The total number of brick-and-mortar clinics providing abortion care in the US declined by more than 40 between 2020 and early 2024.

Banning abortion does not stop the need for abortion access. Which is why many people seeking abortions post-*Dobbs* must overcome huge financial and logistical barriers to get care, especially those in states with total or early gestational bans. The number of Americans traveling out of state for abortions doubled from 81,000 in 2020 to more than 170,000 in 2023. States that border states with total abortion bans saw the sharpest increases in out-of-state patients.

No one should have to travel to another state to access basic healthcare. And in fact, those who can’t overcome the burdens of travelling for care, which for some might mean crossing multiple state lines, may be forced to stay pregnant against their will. Others may decide to self-manage their abortion. Decades of research have documented that the majority of people obtaining abortions have few financial resources, are people of color, and are already parenting. They are the ones most harshly impacted by bans and restrictions.

We also know that providers are resilient and adapting to meet patient needs. While brick-and-mortar facilities provide more than three-quarters of all abortions, online clinics are expanding care options by offering medication abortion services via telehealth. Research by the Society for

Family Planning shows that virtual-only telehealth abortions accounted for almost one in five abortions from October to December 2023.

There are many other important ways *Dobbs* is interfering with reproductive health care across the nation that I don't have time to discuss in detail today, from current and future OB-GYNs not wanting to practice in ban states to impacts on maternal health and people facing obstetric emergencies.

So what does all this mean? Overturning *Roe* did not resolve the debates on abortion that have characterized US politics for the past 50 years. Instead, it enabled policies that have significantly worsened the harms faced by individuals who are most marginalized in our health care system.

Still, despite these immense hardships and many people being denied care, there were more than one million clinician-provided abortions in 2023—a 10% increase from 2020. This is a testament to the heroic efforts of providers, abortion funds and other support networks, to the resilience and determination of people seeking care, and to the centrality of abortion in peoples' lives. And it explains why the anti-abortion movement and their political allies are doubling down on even more repressive policies.

For instance, this year four states introduced legislation—and one passed a law—criminalizing adults who support adolescents seeking abortion care in another state. Earlier in the year, the Alabama Supreme Court's decision to classify frozen embryos as "children" wreaked havoc on fertility treatment services while advancing the anti-abortion movement's long-term goal to enshrine fetal personhood in both law and policy. These attacks on bodily autonomy, coupled with two major abortion cases currently before the Supreme Court, signal that the policy and legal landscape will continue to shift.

The full damage caused by *Dobbs* will not be clear for years to come, but the evidence suggests it will not be easy to repair. That's why it is imperative that policymakers at all levels of government champion a bold vision of abortion care that goes beyond what *Roe* promised.

Only policies rooted in evidence and human rights will guarantee that all people have meaningful access to high-quality, affordable abortion care where they live and via the method they choose.

Thank you.

ⁱ Information throughout this testimony is referenced here: Baden K, Dreweke J and Gibson C. Clear and Growing Evidence That Dobbs Is Harming Reproductive Health and Freedom, Guttmacher Institute, 2024, <https://www.guttmacher.org/2024/05/clear-and-growing-evidence-dobbs-harming-reproductive-health-and-freedom>