



Date: September 15, 2022

To: Members of the Governor's Interagency Council on Health Disparities

Subject: Grounding Reproductive Health Access in a Reproductive Justice Framework

Background

In 2018, the Washington State Legislature passed the Reproductive Parity Act ([Chapter 119, Laws of 2018](#)). The law defines reproductive healthcare broadly as the “care necessary to support the reproductive system, the capability to reproduce, and the freedom and services necessary to decide if, when, and how often to do so, which can include contraception, cancer and disease screenings, abortion, preconception, maternity, prenatal, and postpartum care.” Among other provisions, the law directed the Health Disparities Council to conduct a literature review on disparities in access to reproductive healthcare and to provide recommendations for reducing or eliminating inequities.

In January 2019, the Council submitted its “[Literature Review on Inequities in Reproductive Health Access](#)” to the Governor and appropriate legislative committees. The report included discussion of 45 unique barriers identified through a review of literature. Barriers were further grouped into three categories: Economic, Structural, or Social. The Council approved 14 recommendations included in the report, which were informed by a review of literature, conversations with key informants, and reports authored by state agencies and community-based organizations. While not comprehensive, recommendations represent actions that would reduce disparities in accessing reproductive healthcare for multiple people and groups experiencing inequities in Washington State.

In January 2020, the Council reaffirmed these recommendations through its [State Action Plan](#) to the Governor and Legislature.

Nationally, the COVID-19 pandemic has disrupted reproductive healthcare services such as preventive screenings, abortion services, access to contraception, and availability of medication and treatment. In Washington State, preliminary data suggests that fewer people have accessed reproductive healthcare generally during the pandemic.

On June 24, 2022, the U.S. Supreme Court issued its ruling in the case of *Dobbs v. Jackson Women's Health Organization*, asserting that “[t]he Constitution does not confer a right to abortion” and overruling *Roe v. Wade* and *Planned Parenthood v.*

Casey. In response to the Court ruling, the U.S. Department of Justice stated, “[t]his decision deals a devastating blow to reproductive freedom in the United States. It will have an immediate and irreversible impact on the lives of people across the country. And it will be greatly disproportionate in its effect – with the greatest burdens felt by people of color and those of limited financial means.”¹

Abortion services remain legal and are required by law to be covered by state-regulated health insurance in Washington State, including Apple Health (Medicaid).² In partnership with the governors of California and Oregon, Governor Inslee issued a [Multi-State Commitment](#) on June 24, 2022, to “defend access to reproductive health care, including abortion and contraceptives, and committed to protecting patients and doctors against efforts by other states to export their abortion bans to our states.”³

On August 3, 2022, the American Public Health Association (APHA) held a [webinar titled “Reproductive Rights and Justice: Where do we go from here?”](#) Panelists discussed how public health practitioners can adopt a Reproductive Justice approach to better support the reproductive health of people of color and address systemic barriers to reproductive health.

During APHA’s panel discussion, Jeryl Hayes from If/When/How said, “[w]e have many communities who have long been facing what the reality is. Just having a legal right is not sufficient. We have to also be thinking about access—what does it look like for people to actually access the healthcare that they need?... People are making decisions based on a full range of factors, so the more that we can acknowledge and identify those bigger systems at play, that helps the solutions be multi-pronged and [ensure] that we are looking at the full range of people’s lived experiences.”

Benny Del Castillo from the DC Abortion Fund asserted, “[i]t is no coincidence that the folks who are being impacted the most...are poor people, Black people, Brown people, Indigenous people, trans people, non-binary folks. Folks who are already on the margins—systemically, intentionally oppressed—are really seeing the impact even further... A great first step for any person, especially those in the public health field, is to acknowledge that this is not new. This has been happening. And to also acknowledge that it is very much designed this way... *Roe v. Wade* never guaranteed access...”

Summary

At today’s meeting, Council members will receive a staff briefing on the Reproductive Justice framework, which expands beyond choice and focuses on access to services. In 1994, Black women coined the phrase “Reproductive Justice” from “the concepts of reproductive rights, social justice, and human rights as a way of centering the specific

¹ U.S. Department of Justice. (2022). Attorney General Merrick B. Garland Statement on Supreme Court Ruling in *Dobbs v. Jackson Women’s Health Organization*. Available at: <https://www.justice.gov/opa/pr/attorney-general-merrick-b-garland-statement-supreme-court-ruling-dobbs-v-jackson-women-s>. Accessed 8/31/2022.

² Washington State Health Care Authority. (2022). Health care services and supports: Abortion services. Available at: <https://www.hca.wa.gov/health-care-services-and-supports/apple-health-medicaid-coverage/abortion-services>. Accessed 8/31/2022.

³ Office of the Governor. (2022). West Coast States Launch New Multi-State Commitment to Reproductive Freedom, Standing United on Protecting Abortion Access in face of U.S. Supreme Court Decision on *Roe vs. Wade*. Available at: <https://www.governor.wa.gov/news-media/west-coast-states-launch-new-multi-state-commitment-reproductive-freedom-standing-united>. Accessed 8/31/2022.

lived experience of Black women.”⁴ The framework emphasizes the human right “to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities.”⁵ Staff will also provide a status update on the recommendations included in the Council’s [Literature Review on Inequities in Reproductive Health Access](#).

Recommended Council Action

After discussion, the Council may choose to consider, amend if necessary, and adopt the following motion:

Proposed Motion: The Council recognizes that a legal right to abortion and other reproductive healthcare services is critical to preserving life, humanity, and dignity, and that a legal right without practical access is not sufficient. The Council acknowledges that people who experience systemic and intentional oppression, perpetuated by a history of medical harm—including Black, Brown, Indigenous, trans, and non-binary people, people who are undocumented, and those with low income and limited access to wealth—have been most impacted by lack of access and legal restrictions to reproductive healthcare. Therefore, as part of our anti-racist efforts, the Council adopts a Reproductive Justice framework when considering inequities in health and access and when making recommendations to reduce and eliminate inequities. We commit to understanding how racialized power systems limit access to health and opportunity and commit to centering racial justice in our work.

To request this document in an alternate format or a different language, please contact Kelie Kahler, Washington State Board of Health Communication Manager, at 360-236-4102 or by email at kelie.kahler@sboh.wa.gov. TTY users can dial 711.

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⁴ In Our Own Voice: <https://blackrj.org/wp-content/uploads/2021/06/BlackRJPolicyAgenda.pdf>

⁵ SisterSong. (2022). “What is Reproductive Justice?” Available at: <https://www.sistersong.net/reproductive-justice/>. Accessed 6/27/2022.