



March for Life Annual Theme Announcement and Policy Briefing
“The Power of One: The Importance of Preserving the Hyde Amendment”
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Thank you, Jeanne, for inviting me to join you at this March for Life announcement and briefing. I am truly honored to be here.

Good afternoon. My name is Genevieve Plaster, and I am a senior policy analyst for the Charlotte Lozier Institute, the research and education arm of the Susan B. Anthony List. CLI strives to bring to bear the best science and statistics in defense of life, and works with over 30 associate scholars – physicians, sociologists, statisticians, and lawyers – who contribute their expertise to this mission.

Last week, I was invited to testify as an expert witness on the Hyde Amendment before the House Judiciary Committee’s Subcommittee on the Constitution and Civil Justice.¹ During the hearing, I shared the major findings from the original research² that Dr. New just presented.

Today, I want to provide you with some background information and respond to some concerns and misinformation from Friday’s hearing.

Background

The Hyde Amendment is an appropriations rider that prohibits the use of federal funds for elective abortion or for health benefits coverage that includes elective abortion.³ As a rider, it is not a permanent law, but it has been included with bipartisan support in every annual federal funding bill, which has been signed into law by every president since 1976.

Because Medicaid is a joint federal-state program and so uses a combination of federal and state funds, the states have the ability to use their own Medicaid dollars to fund abortion. This is the

¹ Full video of the hearing is available here: <https://judiciary.house.gov/hearing/ultimate-civil-right-examining-hyde-amendment-born-alive-infants-protection-act/>

² New, Michael J. 2016. “Hyde @ 40: Analyzing the Impact of the Hyde Amendment.” Charlotte Lozier Institute, *On Point* Issue 12. <https://lozierinstitute.org/hydeat40/> (accessed September 28, 2016).

³ Consolidated Appropriations Act, 2016, Division H, Title V, Sec 506 to 507 (c), accessed at: <http://docs.house.gov/billsthisweek/20151214/CPRT-114-HPRT-RU00-SAHR2029-AMNT1final.pdf>

case in 15 states, most of which do so by court order.⁴ Amidst legal challenges in its early years, the Hyde Amendment was re-affirmed as constitutional in 1980 by the U.S. Supreme Court in *Harris v. McCrae*.⁵ The majority opinion addressed the decision of *Roe v. Wade*, which legalized abortion, concluding that “it does not follow that a woman’s freedom of choice carries with it a constitutional entitlement to... financial resources.”

Bipartisan Support

It’s important to make clear that the Hyde Amendment has enjoyed bipartisan support for over 40 years. If ever there *was* an abortion policy that has enjoyed a longstanding bipartisan consensus of support, it *has been* the Hyde Amendment. After all, the protective language was first passed in 1976 by a Congress that was overwhelmingly Democratic.

As far as we know, *every member of Congress has at some point in their career voted for the Hyde Amendment* – whether it be through a voice vote, unanimous consent, or otherwise.

As you know, this year is the first time the Democratic Party’s platform explicitly calls for the repeal of the Hyde Amendment. Recently, an Obama administration spokesperson was asked during a press conference, “Is that something the President supports – the repeal of the Hyde Amendment?” To which he replied, “We have a longstanding view on this. I don’t have any changes in our position to announce today.”⁶

Majority of Americans Oppose Taxpayer-Funding of Abortion

While some groups have been attacking the Hyde Amendment as extreme, national polling has consistently found that Americans overwhelmingly oppose taxpayer-funding of abortion.

A national poll conducted by Marist in January found that taxpayer-funding of abortion is opposed by **nearly 7 in 10 Americans (68%)**.⁷ That opposition holds for diverse demographics. For example:

- Even 51% of those who self-identify as “*pro-choice*” oppose taxpayer-funding of abortion,⁸ as do
- 44% of Democrats⁹
- 65% of African Americans¹⁰

⁴ Though Arizona and Illinois both have court orders to fund non-elective abortions through state Medicaid funds, very few abortions are actually paid for by the state Medicaid program. See Guttmacher Institute. 2016. “State Funding of Abortion Under Medicaid.”

<https://www.guttmacher.org/state-policy/explore/state-funding-abortion-under-medicaid> (accessed September 23, 2016).

⁵ *Harris v. McCrae*, 448 U.S. 297 (1980)

⁶ <https://www.youtube.com/watch?v=RPEXtZop6rM> (July 26, 2016)

⁷ Abortion in America, Knights of Columbus/Marist Poll, 2016, accessed at: <http://www.kofc.org/un/en/resources/communications/abortion-america-january2016.pdf> “Please tell me if you strongly support, support, oppose, or strongly oppose using tax dollars to pay for a woman’s abortion.”

⁸ *Ibid*

⁹ <http://www.kofc.org/un/en/resources/communications/kofc-arist-poll-banner072016.pdf>

¹⁰ <http://www.kofc.org/un/en/resources/communications/kofc-arist-poll-bannerb-072016.pdf>

- 61% of Latinos¹¹, and
- 58% of Millennials¹²

Even more specifically, a 2009 national CNN poll found that sixty-one percent of Americans opposed using tax dollars for abortion, even “when the woman cannot afford it.”¹³ *Sixty-one percent.* Instead of being extreme, the Hyde Amendment has historically been and continues to be a point of consensus for most Americans.

Access to Care

While we can’t know for certain the reasons that 7 in 10 Americans oppose tax-funded abortion, perhaps we can safely say that Americans simply understand that it goes *beyond* simple access to healthcare. Mandating that each taxpayer financially contribute to the only procedure whose intention and effect is to end the life of a young human goes a step further than healthcare access.

The minority of Americans who support federal funding of abortion primarily argue that the Hyde Amendment prevents access to healthcare, especially for low-income women. Even engaging with their understanding that abortion *is* healthcare, the abortion statistics collected and disseminated by the Guttmacher Institute almost astoundingly contradict that claim. According to a July 2016 report, “75% of abortions in 2014 were among low-income patients.”¹⁴ This amounts to about 800,000 women of a low-income background who were able to “access” an abortion in 2014.¹⁵

Addressing that concern with a *pro-life* mentality, which recognizes that abortion is neither healthy nor caring for women, there are over 13,000 federally-funded community health centers¹⁶ that serve about 21 million Americans¹⁷, 12 million of which are patients who have an income at or below the federal poverty line.¹⁸ According to the Health Resources and Services Administration’s database, there were about **three million Ob/GYN visits** to these community health centers in 2014; **two million pap tests** were done; and **half a million mammograms** performed (which is half a million more than Planned Parenthood does). The federal law governing the operation of these health centers, the Public Health Services Act, even lists

¹¹ Ibid

¹² Ibid.

¹³ Poll: Majority favor abortion funding ban, CNN.com, November 18, 2009, accessed at: <http://www.cnn.com/2009/POLITICS/11/18/abortion.poll/>. “Generally speaking, are you in favor of using public funds for abortions when the woman cannot afford it, or are you opposed to that?” Full results can be viewed here: <http://i2.cdn.turner.com/cnn/2009/images/11/17/re17f.pdf>.

¹⁴ Boonstra HD. Abortion in the Lives of Women Struggling Financially: Why Insurance Coverage Matters, *Guttmacher Policy Review* Vol. 19, 2016, accessed at:

https://www.guttmacher.org/sites/default/files/article_files/gpr1904616_0.pdf

¹⁵ Induced Abortion in the United States. Guttmacher Institute, 2016. <https://www.guttmacher.org/factsheet-induced-abortion-united-states>

¹⁶ <https://lozierinstitute.org/health-clinics-nationwide-compared-to-planned-parenthood-centers/>

¹⁷ GAO “Federal Obligations to and Expenditures by Selected Entities Involved in Health-Related Activities 2010-2012” (Mar 2015). <http://www.gao.gov/products/GAO-15-270R>(accessed July 30, 2015).

¹⁸ <http://bphc.hrsa.gov/uds/datacenter.aspx?q=tall&year=2014&state>

“transportation services” to the clinics as one of the “required primary services” that should be offered patients who may need it.¹⁹ That is access to healthcare.

Women’s access to healthcare is clearly important. Repealing the Hyde Amendment takes the conversation a step beyond simple access to care, and would make all taxpayers complicit in subsidizing abortion.

Estimates on Lives Saved by the Hyde Amendment

Though the Hyde Amendment is a financial policy, the most important measurement of its real-world effect is not dollars saved, but *lives* saved, as you already heard from Dr. New.

Though Dr. New has already excellently explained his study, the finding can’t be repeated enough: **Two million lives have been saved as a result of the Hyde Amendment.** Two million lives is the population of the city of Houston, the fourth largest city. Two million lives is the population of the entire state of New Mexico. **Each year, 60,000 lives have been saved by the Hyde Amendment.**

As staffers for Congressional members, I know that each of you are always looking to highlight your Member’s state and provide him or her with information affecting his constituents. What more important information is there than how many lives have been saved by a policy. Dr. New’s original research provides you with *state-specific numbers* to give your bosses on just how many lives have been saved by the Hyde Amendment since its enactment.

Conclusion

In conclusion, I just want to share with you that two nights ago, I attended a pregnancy care center’s annual banquet. The center is actually run by one of last year’s March for Life briefing speakers, Leanna Baumer. Their keynote speaker, Frederica Matthewes-Green recalled speaking with innumerable women who have had abortions, and I think her reflection intersects nicely with the March for Life’s theme, “The Power of One.”

She said, “When I asked [women who have had an abortion], ‘Is there anything anyone could have done? What would you have needed in order to have had that child?’ I heard the same answer over and over: ‘I needed a friend. I felt so alone. I felt like I didn’t have a choice. If only one person had stood by me, even a stranger, I would have had that baby.’”²⁰

Now, while I can’t speak for all of the mothers of the two million lives saved, I can highlight a real scenario that reflects this. In a recently published article, Claire, a young woman who

¹⁹ Public Health Services Act, Section 330, §254b(b)(1)(A)), available at: <http://uscode.house.gov/view.xhtml?edition=prelim&req=42+usc+254b&f=treesort&fq=true&num=20&hl=true> See also Plaster, Genevieve and Rebecca Gonzales. “Access to Care: A Mission for Community Health Centers,” October 27, 2015. <https://lozierinstitute.org/access-to-care-a-mission-for-community-health-centers/> (accessed September 28, 2016).

²⁰ Her recently delivered speech contains parts of this 1996 article: <http://frederica.com/writings/seeking-abortions-middle-ground.html>

experienced an unplanned pregnancy at age 17, said of her situation “I felt hopeless and alone.”²¹ She explained that if Medicaid funding for an abortion had been available, it would have been tempting to go ahead and have that abortion. Instead, she reached out to an acquaintance for support, was accompanied to a pregnancy care center where she saw the first ultrasound of her son, and decided to continue her pregnancy. Now, a year later, Claire reflects: “I don’t know what I would do without him... That’s my baby.”

There was one person who was there for Claire. In her case, the Hyde Amendment’s restriction on taxpayer-funded elective abortion gave her pause to consider all of her options.

One initial friend supported Claire. *One* pregnancy care center was there to inform her what her growing child looked like. *One* Congressman, Representative Henry Hyde, has made a lasting impact with his policy that has saved over two million lives.

In summary, the Hyde Amendment:

- has been included in every annual federal funding bill and has been signed into law by every president since 1976;
- has enjoyed longstanding bipartisan support in Congress;
- is supported by a majority of Americans of diverse backgrounds who oppose taxpayer-funding of abortion;
- has been re-affirmed as constitutional by the Supreme Court; and
- most importantly, has saved over two million lives.

For these compelling reasons, the protective language of the Hyde Amendment should not only be retained as an enforced policy, but should be codified as a permanent law.

Thank you.

²¹ Dean J. Nowhere to Hyde?, *World Magazine* Vol. 31 No. 19, September 17, 2016, accessed at: https://world.wng.org/2016/09/nowhere_to_hyde