



**Testimony of Maine Public Health Association in Support of:
LD 780: RESOLUTION, Proposing an Amendment to the Constitution of Maine to Protect Personal
Reproductive Autonomy**

Joint Standing Committee on Judiciary
State House, Room 438
Monday, January 22, 2024

Dear Senator Carney, Representative Moonen, and distinguished members of the Joint Standing Committee on Judiciary. My name is Rebecca Boulos. I am a resident of South Portland and executive director of Maine Public Health Association.

MPHA is the state's oldest, largest, and most diverse association for public health professionals. We represent more than 700 individual members and 60 organizations across the state. MPHA works to optimize the health of people and places in Maine through advocacy, education, partnerships, and public health workforce development. We are not tied to a national agenda, which means we are responsive to the needs of Maine's communities, and we take that responsibility seriously.

MPHA is in support of LD 780: "RESOLUTION, Proposing an Amendment to the Constitution of Maine to Protect Personal Reproductive Autonomy." This resolution would amend the Constitution of Maine to protect personal reproductive autonomy.

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. Longstanding systems of health and economic inequity – including access to reproductive health care and the autonomy to make reproductive healthcare decisions – cause continued and documented disparities in educational achievement, financial security, and social status.¹ Lack of access to reproductive health care, including abortion care, disproportionately impacts individuals living in rural areas, racial and ethnic minorities, adolescents, incarcerated people, and those who are socioeconomically disadvantaged. Denying pregnant people the right to access safe, timely, affordable, and respectful reproductive health care harms the physical, mental, and social well-being of all people and denies them their right to health.

Data show that variations in state-level abortion care access are associated with maternal mortality – in states with more restrictive abortion care access policies (including the denial of Medicaid coverage) there are higher rates of death for birthing parents and their infants.²

We all want just and fair opportunities to be healthy and the freedom to make our own health choices with our doctor. 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. A healthy public requires that such choices always be available to everyone; as such, a constitutional amendment to protect personal reproductive autonomy would contribute to the well-being of the people of Maine.

Thank you for considering our testimony.

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 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.