

Committee on Judiciary
Cross Building, Room 438
100 State House Station
Augusta, ME 04333
c/o Susan Pinette, Committee Clerk

Re: LD 780, RESOLUTION, Proposing an Amendment to the Constitution of Maine to Protect Personal Reproductive Autonomy

Dear Senator Carney, Representative Moonen, and esteemed member of the Committee on Judiciary,

I represent the National Association of Social Workers, Maine Chapter in support of Senator Vitelli's LD 780 on reproductive autonomy. We believe that supporting reproductive rights is a health equity issue, a women's rights issue, and defends against the cycle of poverty. Disparities in reproductive healthcare access are deeply rooted in our society. Access should not be a matter of class. The rate of unwanted pregnancies among women experiencing poverty is five times higher than the rate for women with higher incomes (Guttmacher Institute, 2011; American Public Health Association). Currently, about 25% of women who qualify for Medicaid and who seek an abortion are forced to carry an unwanted pregnancy to term due to the cost in states where insured abortion access is limited (Guttmacher Institute).

Social workers, per our Code of Ethics, must promote clients' self-determination by "seek[ing] to enhance capacity and opportunity to change and to address their own needs" (NASW). The decision to become a parent is one of the most important and personal decisions that we as humans make. When women have autonomy in making decisions about their reproductive healthcare, they have greater control over their economic security. Maine's women are capable and deserving of the opportunity to make the best decisions for their health, lives, and futures, regardless of economic status, and free from stigma and judgment.

Over my 40+ years as a clinical social worker, I have seen the economic, physical, and emotional toll that restricted access to abortion services has had on multiple clients and their families. Mary was a beautiful, sassy, and bright 21-year-old woman who was first referred to me for anxiety and depression symptoms. She was pregnant, had two children, and was married to the father of her children. Her husband was emotionally and physically abusive to her. Her religious upbringing was a critical factor in her not considering abortion or divorcing her husband. I supported her right to choose, did my best to help her manage her mental health issues, and ensured that her children were safe. Yet no evidenced-based treatments were going to help Mary's mental health issues while living under siege in a home filled with trauma. Twenty years later, she was referred back to me for counseling. Her sassiness and hope had been eroded; her beauty faded, and her mental health issues had escalated to the point where she could only leave her home for health appointments. She had seven grown children and was still married to the same abusive man, who was on disability for a combination of physical and mental health issues. Not surprisingly, several of her seven children had chosen life partners who were abusive, as this was what they grew up with and considered normal. Their hope for better lives and breaking the generational poverty cycle was dimming.

NASW Maine urges you to provide hope for Mary and families such as hers and support LD 780.

Sincerely,
Julie M. Schirmer, LCSW, ACSW
President, Board of Directors
Chair, Policy Committee
naswmechapterpres@gmail.com

NASW Maine Chapter
Resident, Falmouth, Maine

References:

American Public Health Association: <https://apha.confex.com/apha/140am/webprogram/Paper263858.html>

Guttmacher Institute (abortion and low-income women): <https://www.guttmacher.org/gpr/2016/07/abortion-lives-women-struggling-financially-why-insurance-coverage-matters>

Guttmacher Institute (restricting Medicaid funding): <https://www.guttmacher.org/news-release/2009/restricting-medicaid-funding-abortion-forces-one-four-poor-women-carry-unwanted>

NASW Code of Ethics: <https://www.socialworkers.org/About/Ethics/Code-of-Ethics/Code-of-Ethics-English>