

Hello, my name is Jessica Semler, and I'm the Public Affairs Director for Planned Parenthood of Western Pennsylvania.

We are a reproductive health and rights organization. In Western PA we have 6 family planning clinics, and serve nearly 20,000 patients annually. The vast majority of our services are preventative; cancer screenings, well woman exams, contraception, STI testing and treatment, and more. Many of our patients rely on Medicaid and Title X dollars to get their care, and over 75% of our patients live at or below 150% of the federal poverty line. We also have one abortion clinic in Western, PA., located here in downtown Pittsburgh. This clinic operates completely separately from our family planning clinic, they don't share the same budget, they don't even share the same linens. This is because of the Hyde amendment, which says that no federal dollars can go to abortion services. When women come to us for abortions, they must pay out of pocket, unless they are the rare exception and have insurance which covers their procedure. Over 90% of abortions take place within the first 12 weeks of pregnancy, and even then, these procedures range from several hundred to well over \$1,000. Thanks to a private donation fund, some women are able to access some assistance, but it hardly offsets the financial burden incurred, amplified by the fact that women often have to take multiple days off work, and arrange for childcare and transportation to make their appointments. By denying Medicaid recipients access to abortion, we're denying low-income women, women of color, young people and immigrants the right to exercise this very personal decision with autonomy and dignity. This matters because women's access to abortion care is essential not just to our health and well-being but also to our ability to pursue an education, hold jobs, support our families, achieve economic security, and function as free and equal members of society. Without access to abortion care, all that is in jeopardy.

I am proud that we offer abortion services, which are part of reproductive healthcare, and a service that 1 in 4 women will need in her lifetime.

I stand here as a professional in reproductive health advocacy, but today I want to talk to you as a woman who's had an abortion.

5 years ago, I moved back to Pittsburgh to be with my family because my dad was in poor health. I had been working on the presidential campaign in Colorado, and while I came to Pittsburgh victorious, I was also very broke, and looking for fulltime work while I was scraping by with some consulting jobs.

I needed a refill on my birth control, and I went back to the one place I always knew I could count on, especially now since I had no insurance, Planned Parenthood. The appointment was at first unremarkable, I peed in a cup for a pregnancy test, which all women know is standard when getting birth control. I was chatting with the nurse casually when she looked down at the test, looked up at me, and said the words I never expected to hear "you're pregnant." Having only been reunited with my partner a couple weeks before, and already on birth control, I was in utter shock, to say the least.

I immediately started crying. I was at a low point where I wasn't sure if my debit card was going to pay for my parking that day, and I just found out I could potentially be caring for another person.

The staff was incredibly patient, and immediately offered resources for whatever decision I might want to make, to go forward with the pregnancy, adoption, or abortion. Keeping this was not an option to me; I always told myself that if I were to parent, I would want to give my child what my parents were able to give me and more, and I was in absolutely no position to do this, and wouldn't be for some time. I looked into adoption, but wouldn't be eligible for prenatal care until seven months due to some archaic PA laws, the fact that I wouldn't be able to set up this baby for success healthwise infuriated me. Even if I wanted to go the adoption route, I would continue to face barriers to have a healthy pregnancy.

We are now almost 5 years to the day of my decision to have an abortion. Looking back, I have no doubt this was the best decision for me. But it's impossible to reflect on my story, without thinking about those who wouldn't have the same options as me.

Even with the help of the donation fund from Planned Parenthood, and the fact that I was only 6 weeks pregnant when the procedure was less expensive, my partner and I still had to scrap together nearly \$500, which is a lot of money. I was beyond lucky, that I also had the support of my parents, including my very Catholic father who told me this was my choice. If I had been on my own, paying rent, and bills, while looking for work, I really don't know what I would have done.

This experience changed my outlook and informs the work I passionately do every day. Even though my situation was financially difficult, it pales in comparison to many folks who are faced with even more barriers.

For as many reasons as there are people, sometimes, women need abortions. Healthcare is a human right, and abortion is healthcare. Sharing my really personal story is still scary because of the stigma around abortion, and the Hyde amendment is stigma, made law. Each woman — no matter how much money she makes or who provides her insurance — should be able to access the full-range of reproductive health care, including abortion. Each woman should be able to make her own decisions about pregnancy based on her own unique circumstances, and have the resources she needs to exercise that decision with autonomy and dignity.

We must end the days when our government denies resources and supports to those in greatest need; coerces, shames and blocks women's decisions; and creates barriers that cause women in poverty and women of color to suffer the most. I thank you for myself, all of the patients we see, and all of the folks who don't currently have the resources or support to walk through our clinic doors for this Will of Council against the Hyde Amendment.