



YASSAMIN

DEMOCRAT ⚡ FOR CONGRESS

**REPRODUCTIVE RIGHTS
& WOMEN'S HEALTH
POLICY PLAN 2024**



INTRODUCTION

Yassamin is dedicated to ensuring that we stop rolling back the clocks on reproductive healthcare, and enshrine it as a fundamental right once and for all. As a local champion for abortion rights and public health, Yassamin will fight in Congress to secure and protect abortion rights for all women, transgender, and nonbinary people. All Arizonans deserve the right to make decisions over their own bodies, to access the healthcare services that are right for them, and to do so privately and without government intervention.

THE PROBLEM

On April 9, 2024, the Arizona Supreme Court reinstated a total abortion ban that dates back to the Civil War.¹ Putting into effect a territorial ban that was conceptualized when slavery was still the law of the land shows the danger of turning the clock back to a point where basic civil rights were non-existent for millions of people. Now, **women and girls in the state have fewer rights to make decisions over their own bodies.** Across the U.S., nearly one in five women live in states with total abortion bans, like Arizona.²

Attacks on abortion rights are not isolated. Lawmakers are relentlessly looking for new ways to criminalize or severely restrict access to vital reproductive and sexual health services, including contraception and gender-affirming care.³ As these threats become reality, individuals' rights to make private medical decisions and healthcare providers' obligation to protect their patients' medical privacy, are also in danger.⁴ Inadequate access to abortion, reproductive, and sexual healthcare services most directly affects communities that are already marginalized and underserved by our healthcare system—including people of color, low-income people, immigrants, young people, and people with disabilities.⁵ These policies **worsen longstanding disparities in healthcare access and outcomes for the most vulnerable people in our community.**⁶

Abortion is a human right.

Upholding a ban on our bodily autonomy – a ban that was created before women could vote – **is not justice.** This ban endangers the lives of women and their children.

That's why, when Roe was overturned, I led the charge to direct the Phoenix Police Department to make enforcement of Arizona's abortion ban their lowest priority – because no doctor, nurse, patient or pharmacist should go to jail for providing or receiving basic healthcare.

We're watching firsthand what extremist Republicans like Trump and his MAGA allies will do when they're in power – ban abortion nationwide.

We need to restore Roe v. Wade, pass the Arizona Right to Abortion Initiative, and make sure women have the right to an abortion.

YASSAMIN
DEMOCRAT FOR CONGRESS

WHAT YASSAMIN HAS DONE

As a Phoenix City Councilwoman and Vice Mayor, Yassamin was at the forefront of local efforts to protect abortion rights. In the aftermath of the Supreme Court's *Dobbs* decision, Yassamin led the push to draft and enact a resolution directing the Phoenix Police Department to make enforcement of Arizona's near-total abortion ban its lowest priority.⁷ Yassamin also worked to create the City of Phoenix's first Public Health Advisor position, charged with addressing and alleviating the public health challenges faced by the city's vulnerable communities.⁸

PHOENIX
NewTimes

Phoenix Orders City Cops to Make Abortion Cases 'Lowest Priority'

"I'm proud that today we're part of a council that firmly says we are a pro-choice city. We are against going back decades in time," council member Yassamin Ansari said shortly before the vote.

October 12, 2022

AZMIRROR

Phoenix votes to de-prioritize enforcement of abortion laws

October 12, 2022

SOLUTIONS

Yassamin understands that protecting abortion rights requires expanding and protecting all forms of abortion care, reproductive care, and sexual health care for all who need them. As a Congresswoman, Yassamin will work tirelessly to ensure that all Arizonans can access these services safely, affordably, and privately. In addition to increasing access to these types of care, Yassamin will advocate for policies that create more equitable healthcare access, quality, and outcomes for people who are underserved and marginalized by our current healthcare system. **In Congress, Yassamin will fight to:**

Codify a Woman's Right to Abortion

Pass the *Women's Health Protection Act* (WHPA), which guarantees the right to abortion nationwide without unnecessary burdens. Specifically, WHPA would:

- ✦ **Secure timely access to abortion** procedures, medications, and telehealth services in early pregnancy.⁹
- ✦ **Ensure access to abortions at all stages of pregnancy** by protecting a medical provider's right to render abortion care before and after fetal viability, especially when necessary to protect the life and health of the patient.¹⁰
- ✦ **Protect people seeking abortion** from receiving inaccurate medical information and undergoing unnecessary medical procedures, including mandatory in-person visits, arbitrary waiting periods, and disclosing the reason for obtaining an abortion.¹¹
- ✦ **Protect the right to travel out of state** for abortion services.¹²
- ✦ **Protect medical providers who perform abortions** from discriminatory credentialing requirements and conditions that only apply to them.¹³
- ✦ **Prohibit states from passing laws that restrict access to abortion care**, unless they significantly improve the safety of patients receiving abortion care.¹⁴

Pass the *Secure Access for Essential Reproductive (SAFER) Health Act* to protect the medical privacy of people who seek and obtain abortion services and care.¹⁵ If passed, this Act would:

- ✦ **Prohibit the unauthorized disclosure of information** related to an individual's abortion or pregnancy during any legal proceedings.¹⁶
- ✦ **Require the Department of Health and Human Services (HHS) to educate** the public about their right to medical privacy and all entities covered by the law about their legal obligations to maintain patients' privacy.¹⁷
- ✦ Advocate for legislation and resources to **expand and preserve access to critical medical education and training for abortion care**, particularly for OB/GYN residents and providers in states with abortion restrictions.¹⁸
- ✦ Advocate for legislation to **expand mental health services for people impacted by abortion restrictions**, especially people of reproductive age who may be more likely to suffer from depression, anxiety, and suicide due to restrictive abortion care.¹⁹

Expand Access to Reproductive Services and Gender-Affirming Care

Passing the *Expanding Access to Family Planning Act* is critical to ensuring that people can make choices over their reproductive and sexual health care. The Act would:

- ✦ **Increase funding for Title X National Family Planning Program clinics** that provide essential reproductive, preventative, and sexual healthcare services to low-income patients.²⁰ If passed, this bill would nearly double the amount of annual funding for Title X clinics to over \$500 million for the next 10 years.²¹
- ✦ **Protect and expand access to affordable, high-quality contraceptive care.** Nearly 4 million women across the country, including almost 85,000 Arizona women, rely on Title X clinics for their contraceptive care.²² Most of these women have incomes at or below the federal poverty level, and many are also uninsured.²³ Providing Title X clinics with funding to expand their services ensures that all women can continue to access the contraceptive care of their choice.
- ✦ **Expand education regarding abortion access and other pregnancy options.** Title X clinics are unable to use federal funds to perform abortions.²⁴ However, this bill would require Title X clinics to discuss all available options with pregnant patients, including prenatal care and delivery, infant care, foster care, adoption, and abortion, and to provide referrals for these services when requested by a patient.²⁵ These protections are critical to prevent attacks like the Trump Administration's now-repealed "Gag Rule," which limited Title X Clinics' ability to provide patients with information and referrals for abortion services.²⁶

Advocate for a *Transgender Bill of Rights* to secure fundamental rights for transgender and nonbinary people, including inclusive healthcare services.²⁷ A Transgender Bill of Rights would:

- ✦ **Secure the right to bodily autonomy** for transgender and nonbinary people. In 2023 alone, states introduced 157 pieces of legislation that would restrict access to gender-affirming care, with 34 of these provisions actually enacted.²⁸ In 2022, Arizona banned certain types of gender-affirming care for youth.²⁹ This bill would protect access to gender-affirming care for transgender and nonbinary individuals, in addition to banning the use of forced and medically unproven medical procedures like "conversion therapy."³⁰
- ✦ **Secure the right to ethical healthcare for transgender and nonbinary people.** Transgender and nonbinary people are extremely underserved and marginalized by our healthcare system,

often lacking access to medical providers who are able to provide competent and compassionate care.³¹ This bill would protect individuals from discrimination on the basis of sex and gender identity and expand the network of providers trained to provide competent care to transgender and nonbinary patients.³² The bill would also protect medical providers of reproductive and abortion care who serve transgender and nonbinary patients from threats and violence related to their work.³³

Reduce Disparities in Women’s Healthcare Access, Quality, and Outcomes

Pass the *Black Maternal Health Momnibus Act*, a package of 13 bills aimed at addressing the maternal health crisis in the U.S., where maternal deaths are the highest among wealthy countries and continuing to rise at an alarming rate.³⁴ The Momnibus Act would:

- ✦ **Make it a federal priority to improve maternal health**, especially for women of color, veterans, and other vulnerable communities.³⁵ Maternal deaths are unacceptably high across the board, but women of color, especially Black and Indigenous women, are most at risk of experiencing life-threatening complications during childbirth.³⁶ The Momnibus Act would fund programs to address maternal health disparities and maternal behavioral health needs, as well as improve data collection and research to better understand and combat these disparities.³⁷
- ✦ **Expand access to high-quality and affordable maternal and infant care** by expanding the workforce of maternal health providers and investing in telehealth services to deliver care to patients in rural and underserved areas.³⁸ These federal resources are critical to meeting the needs of patients affected by a growing number of “maternity care deserts” across the country.³⁹
- ✦ **Expand existing safety net programs** to improve the social determinants of maternal health.⁴⁰ The health outcomes of mothers and babies are deeply impacted by the environments in which they live, including access to healthcare, nutritious food, and stable housing.⁴¹ The Momnibus Act would expand the coverage available to low-income mothers through Medicaid and the Children’s Health Insurance Program (CHIP), as well as extend eligibility for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) to include vital postpartum and breastfeeding periods.⁴²

Enact Medicare for All

Expanding access to affordable, high-quality healthcare is one of the most effective ways to reduce disparities in access to care, particularly for women of reproductive age and transgender and nonbinary people.⁴³ The *Medicare for All Act of 2023* would ensure that all Americans can access the healthcare services they need—including abortions, contraception, and gender-affirming care.⁴⁴

ENDNOTES

1. Adam Edelman and Alex Tabet, “Arizona Supreme Court Rules a Near-Total Abortion Ban from 1864 Is Enforceable,” NBC News, April 9, 2024, <https://www.nbcnews.com/politics/arizona-supreme-court-ruling-abortion-ban-rcna146915>.
2. “Interactive Map: US Abortion Policies and Access after Roe,” Guttmacher Institute, March 13, 2014, <https://states.guttmacher.org/policies/arizona/abortion-policies>; “Women’s Health Protection Act (WHPA),” Center for Reproductive Rights, June 8, 2021, <https://reproductiverights.org/the-womens-health-protection-act-federal-legislation-to-protect-the-right-to-access-abortion-care/>.
3. Kimya Forouzan and Isabel Guarnieri, “State Policy Trends 2023: In the First Full Year since Roe Fell, a Tumultuous Year for Abortion and Other Reproductive Health Care,” Guttmacher Institute, December 14, 2023, <https://www.guttmacher.org/2023/12/state-policy-trends-2023-first-full-year-roe-fell-tumultuous-year-abortion-and-other>; National Women’s Law Center, “Don’t Be Fooled: Birth Control Is Already at Risk,” National Women’s Law Center, June 17, 2022, <https://nwlc.org/resource/dont-be-fooled-birth-control-is-already-at-risk/>.
4. Rebecca McCray, “Impending Threat of Abortion Criminalization Brings New Urgency to the Fight for Digital Privacy | News & Commentary,” American Civil Liberties Union, May 17, 2022, <https://www.aclu.org/news/privacy-technology/impending-threat-of-abortion-criminalization-brings-new-urgency-to-the-fight-for-digital-privacy>.
5. Liza Fuentes, “Inequity in US Abortion Rights and Access: The End of Roe Is Deepening Existing Divides,” Guttmacher Institute, January 17, 2023, <https://www.guttmacher.org/2023/01/inequity-us-abortion-rights-and-access-end-roe-deepening-existing-divides>.
6. Ibid.
7. Caitlin Sievers, “Phoenix Votes to De-Prioritize Enforcement of Abortion Laws,” Arizona Mirror, October 12, 2022, <https://azmirror.com/2022/10/12/phoenix-votes-to-de-prioritize-enforcement-of-abortion-laws/>; City of Phoenix, “City Council Policy Session Agenda,” October 11, 2022, <https://www.phoenix.gov/cityclerk/site/City%20Council%20Meeting%20Files/10-11-22%20Policy%20Agenda-FINAL.pdf>.
8. Christina Estes, “Phoenix Hires City’s First Public Health Adviser,” Fronteras Desk (KJZZ, September 13, 2022), <https://fronterasdesk.org/content/1809466/phoenix-hires-citys-first-public-health-adviser>.
9. “S.701 – Women’s Health Protection Act of 2023,” Congress.gov, March 8, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/701>.
10. Ibid.
11. Ibid.
12. Ibid.
13. Ibid.
14. Ibid.
15. “H.R.459 – SAFER Health Act of 2023,” Congress.gov, January 2023, <https://www.congress.gov/bill/118th-congress/house-bill/459>.
16. Ibid.
17. Ibid.
18. American College of Obstetricians and Gynecologists, “Issue Brief: Training and Workforce after Dobbs,” ACOG, August 2023, <https://www.acog.org/advocacy/abortion-is-essential/trending-issues/issue-brief-training-and-workforce-after-dobbs>.
19. Annalies Winny, “Abortion Bans’ Impact on Mental Health,” Bloomberg School of Public Health (Johns Hopkins University, February 6, 2024), <https://publichealth.jhu.edu/2024/abortion-bans-impact-on-mental-health>; Julia R. Steinberg, “Mental Health Symptoms When Abortion Access Is Restricted,” JAMA 331, no. 4 (January 23, 2024): 289–91, <https://doi.org/10.1001/jama.2023.26816>.
20. “Title X: The Nation’s Program for Affordable Birth Control and Reproductive Health Care,” Planned Parenthood Action Fund, 2016, <https://www.plannedparenthoodaction.org/issues/health-care-equity/title-x>.
21. “Expanding Access to Family Planning Act” (Office of U.S. Senator Michael Bennett), accessed March 17, 2024, https://www.bennet.senate.gov/public/_cache/files/e/7/e7ec4faa-5972-4631-a3d2-26acb0683655/05DEC5444BEF0D1B90C5565987898C6E.expanding-access-to-family-planning-act-summary.pdf.
22. Guttmacher Institute, “Publicly Supported Family Planning Services in the United States,” Guttmacher Institute, October 29, 2019, <https://www.guttmacher.org/fact-sheet/publicly-supported-FP-services-US>; Guttmacher Institute, “Publicly Funded Contraceptive Services 2015 Tables 1–7” (Guttmacher Institute), accessed March 17, 2024, https://www.guttmacher.org/sites/default/files/report_downloads/publicly_funded_contraceptive_services_2015_tables_1-7.pdf.
23. Guttmacher Institute, “Publicly Supported Family Planning Services in the United States,” Guttmacher Institute, October 29, 2019, <https://www.guttmacher.org/fact-sheet/publicly-supported-FP-services-US>.

24. Angela Napili, “Title X Family Planning Program” (Congressional Research Service, June 8, 2023), <https://crsreports.congress.gov/product/pdf/IF/IF10051>.
25. “S.4550 – 117th Congress (2021–2022): Expanding Access to Family Planning Act,” Congress.gov, July 19, 2022, <https://www.congress.gov/bill/117th-congress/senate-bill/4550>.
26. “Title X: The Nation’s Program for Affordable Birth Control and Reproductive Health Care,” Planned Parenthood Action Fund, 2016, <https://www.plannedparenthoodaction.org/issues/health-care-equity/title-x>.
27. “H.Res.269 – Recognizing That It Is the Duty of the Federal Government to Develop and Implement a Transgender Bill of Rights to Protect and Codify the Rights of Transgender and Nonbinary People under the Law and Ensure Their Access to Medical Care, Shelter, Safety, and Economic Security,” Congress.gov, March 30, 2023, <https://www.congress.gov/bill/118th-congress/house-resolution/269/text>.
28. Kimya Forouzan and Isabel Guarnieri, “State Policy Trends 2023: In the First Full Year since Roe Fell, a Tumultuous Year for Abortion and Other Reproductive Health Care,” Guttmacher Institute, December 14, 2023, <https://www.guttmacher.org/2023/12/state-policy-trends-2023-first-full-year-roe-fell-tumultuous-year-abortion-and-other>.
29. “SENATE BILL 1138” (Arizona State Legislature, 2022), <https://www.azleg.gov/legtext/55leg/2R/laws/0104.pdf>; “States with Specific Gender Affirming Care Restrictions,” American Speech–Language–Hearing Association, accessed March 17, 2024, <https://www.asha.org/advocacy/state-mandates-around-diversity-equity-and-inclusion/states-with-specific-gender-affirming-care-restrictions>.
30. “H.Res.269 – Recognizing That It Is the Duty of the Federal Government to Develop and Implement a Transgender Bill of Rights to Protect and Codify the Rights of Transgender and Nonbinary People under the Law and Ensure Their Access to Medical Care, Shelter, Safety, and Economic Security,” Congress.gov, March 30, 2023, <https://www.congress.gov/bill/118th-congress/house-resolution/269/text>.
31. Caroline Medina et al., “Protecting and Advancing Health Care for Transgender Adult Communities,” Center for American Progress, August 18, 2021, <https://www.americanprogress.org/article/protecting-advancing-health-care-transgender-adult-communities>; Joshua D. Safer et al., “Barriers to Healthcare for Transgender Individuals,” *Current Opinion in Endocrinology & Diabetes and Obesity* 23, no. 2 (April 1, 2016): 168–71, <https://doi.org/10.1097/med.000000000000227>.
32. “H.Res.269 – Recognizing That It Is the Duty of the Federal Government to Develop and Implement a Transgender Bill of Rights to Protect and Codify the Rights of Transgender and Nonbinary People under the Law and Ensure Their Access to Medical Care, Shelter, Safety, and Economic Security,” Congress.gov, March 30, 2023, <https://www.congress.gov/bill/118th-congress/house-resolution/269/text>.
33. Ibid.
34. “Black Maternal Health Momnibus Act,” March of Dimes, July 21, 2023, https://www.marchofdimes.org/sites/default/files/2023-08/MOD_Momnibus_2023_7.21.23.pdf; Sara Berg, “Alarming Rise in U.S. Maternal Mortality Signals Need for Change,” American Medical Association, September 14, 2023, <https://www.ama-assn.org/delivering-care/population-care/alarming-rise-us-maternal-mortality-signals-need-change>; “S.1606 – Black Maternal Health Momnibus Act,” Congress.gov, May 15, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/1606?s=1&r=87>.
35. “S.1606 – Black Maternal Health Momnibus Act,” Congress.gov, May 15, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/1606?s=1&r=87>.
36. Laura G. Fleszar et al., “Trends in State–Level Maternal Mortality by Racial and Ethnic Group in the United States,” *JAMA* 330, no. 1 (July 3, 2023): 52–61, <https://doi.org/10.1001/jama.2023.9043>.
37. “S.1606 – Black Maternal Health Momnibus Act,” Congress.gov, May 15, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/1606?s=1&r=87>.
38. Ibid.
39. Andrea Sonenberg and Diana J. Mason, “Maternity Care Deserts in the US,” *JAMA Health Forum* 4, no. 1 (January 12, 2023): e225541, <https://doi.org/10.1001/jamahealthforum.2022.5541>.
40. “S.1606 – Black Maternal Health Momnibus Act,” Congress.gov, May 15, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/1606?s=1&r=87>.
41. Guillermina Girardi, Monica Longo, and Andrew A Bremer, “Social Determinants of Health in Pregnant Individuals from Underrepresented, Understudied, and Underreported Populations in the United States,” *International Journal for Equity in Health* 22, no. 1 (September 6, 2023), <https://doi.org/10.1186/s12939-023-01963-x>.
42. “Black Maternal Health Momnibus Act,” March of Dimes, July 21, 2023, https://www.marchofdimes.org/sites/default/files/2023-08/MOD_Momnibus_2023_7.21.23.pdf; “S.1606 – Black Maternal Health Momnibus Act,” Congress.gov, May 15, 2023, <https://www.congress.gov/bill/118th-congress/senate-bill/1606?s=1&r=87>.
43. Alison P Galvani et al., “Improving the Prognosis of Health Care in the USA,” *The Lancet* 395, no. 10223 (February 15, 2020): 524–33, [https://doi.org/10.1016/s0140-6736\(19\)33019-3](https://doi.org/10.1016/s0140-6736(19)33019-3); Claire E. Margerison et al., “Impacts of Medicaid Expansion on Health among Women of Reproductive Age,” *American Journal of Preventive Medicine* 58, no. 1 (January 1, 2020): 1–11, <https://doi.org/10.1016/j.amepre.2019.08.019>.
44. “H.R.3421 – Medicare for All Act,” Congress.gov, May 17, 2023, <https://www.congress.gov/bill/118th-congress/house-bill/3421?s=1&r=66>.