Trump administration to ban abortions at facilities receiving federal family planning funds

Kate Randall 19 May 2018

President Donald Trump's plans to propose a new rule that would bar abortions at facilities that receive federal family planning funds marks an escalation of the administration's attack on a woman's constitutionally protected abortion rights. At the same time, the move will punish low-income women in particular from receiving family planning services, increasing the likelihood of unwanted pregnancies and births.

Though the exact language of the proposed rule has not yet been released publicly by the White House, Trump is expected to issue new guidelines for Title X, the only federal program dedicated to paying for birth control. The new rule would require a "physical as well as financial separation" between entities that receive Title X funds and those that provide abortions.

Trump's rule stands in direct contradiction to the 1973 US Supreme Court decision in *Roe v. Wade*, which said that states cannot ban abortions before viability of the fetus. The rule would not affect federal funding through Medicaid, which is already barred from using federal funds for abortions.

The move is the latest chapter in the Republican Party's yearslong crusade to end funding to Planned Parenthood, the women's health care provider that currently uses Title X funding to provide contraceptives to an estimated 40 percent of the 4 million people receiving it for family planning services. Planned Parenthood stands to lose an estimated \$50 million in funding.

Earlier this month, more than 190 members of the US Congress sent a letter to Health and Human Services (HHS) Secretary Alex Azar to restore a Reagan-era rule imposing the "physical and financial" separation of facilities receiving Title X funding and those providing abortions. Reagan's rule, which was eventually upheld by the US Supreme Court but never implemented, was ended under the Clinton administration.

Title X was launched in 1971 to fulfill President Richard Nixon's pledge that "no American woman should be denied access to family planning assistance because of her economic condition." It is an indication of the rightward lurch of the entire political establishment that Nixon's promise now stands in stark contrast to Trump's reactionary rule. If implemented, a program that was initially set up to provide access to family planning to low-income women will now deny these services to millions.

A Trump administration official made the spurious claim that the proposal "does not necessarily defund Planned Parenthood, as long as they're willing to disentangle taxpayer funds from abortion as a method of family planning, which is required by the Title X law." The official added, "Any grantees that perform, support, or refer for abortion have a choice—disentangle themselves from abortion or fund their activities with privately raised funds."

How this "disentanglement" would work in practice exposes the falsity of such claims. Critics of the rule have likened it to a "gag rule," prohibiting health care providers from mentioning abortion in the exam room. Planned Parenthood said in a statement: "The Trump-Pence administration's new rule would block patients from care at Planned Parenthood. It would also prohibit doctors, nurses, hospitals, and community health centers across the country from being able to refer their patients for safe, legal abortion."

"This 'gag rule' is not only unconscionable, but it undermines medical ethics by forcing health care professionals to withhold accurate and timely medical information from patients," Jenn Conti, a fellow with Physicians for Reproductive Health, told Politico. "If I can't mention the word 'abortion,' then I am not providing my pregnant patients who want to know all of their options with complete, accurate, unbiased medical information."

The ban could prevent a health care provider from mentioning abortion, even under life-and-death situations, such as when a pregnant woman also has cancer or another medical condition that poses danger to her and her pregnancy.

Those people who rely on government-subsidized initiatives—including working class, poor and immigrant women—would be most affected by the rule. Black mothers, who make up 30 percent of Title X recipients, are currently dying at a rate three or four times higher than white mothers in child birth. The shutting of women's health clinics due to Trump's rule would both exacerbate the inequities in care while diminishing services for all women.

Not only would women be barred from abortion counseling and services at entities that provide both family planning and abortions, but they would not get birth control, cancer screenings, STD testing and treatment, or even general women's health exams.

Planned Parenthood is the country's largest abortion provider, performing just over 330,000 in 2009, or about 40 percent of all abortions that year. More than one-third of lowincome women who get birth control through Title X currently do so at one of Planned Parenthood's 817 clinics.

Forcing Planned Parenthood to separate its facilities that provide abortions from locations that provide other women's health services would inevitably result in withholding vital health services to millions of women. A new analysis from the Guttmacher Institute estimates that there are over 103 counties in the US where Planned Parenthood is the only provider of publicly funded contraceptives.

Some 90 percent of Planned Parenthood clinics report being able to provide emergency contraceptives, compared to 34 percent of federally qualified health clinics. And more than 80 percent of the organization's clinics provide same-day access to intrauterine devices (IUDs), compared to just 30 percent of other clinics.

President Trump's executive move follows recent initiatives to curb abortion rights at the state level. Earlier this month, Iowa Governor Kim Reynolds signed so-called "heartbeat" legislation that bans abortions once a fetal heartbeat has been detected, at about six weeks, with certain exceptions. Critics have pointed out that many women may not even be aware that they are pregnant at six weeks.

A ban on abortions after 15 weeks was signed into law by Mississippi Governor Phil Bryan in March. Also that month, the Kentucky House of Representatives passed a bill banning dilation and evacuation, a procedure often used in abortions if a patient is over 11 weeks pregnant. Both measures are facing court challenges.

Texas has been experimenting with cutting off abortion providers from state-level family planning grants. Data published in the *New England Journal of Medicine* showed that blocking Planned Parenthood from state programs resulted in a 35.5 percent drop in women receiving long-acting, reversible contraceptives, including IUDs and birth control implants.

Trump's assault on abortion and reproductive health care is of a piece with the administration's assault on health care in general. In particular, HHS's decision to provide waivers to states enabling them to impose work requirements for Medicaid recipients will kick tens, and potentially hundreds of thousands of people out of the health care system altogether. Such people seeking care at Planned Parenthood and other clinics will find that their services are no longer an option.

Senator Kirsten Gillibrand, Democrat of New York, appeared Friday on CNN to denounce Trump's new rule. "I think this is an issue that should enrage the American public, particularly women, because it's an attack on them," she said. "I don't know why members of Congress think it's their job to tell women what to do with their health care."

As with the attacks on Medicaid, however, such rhetoric will soon fade. More of concern to Congressional Democrats is reform of the Congressional Accountability Act, which set up the process for handling sexual harassment complaints on Capitol Hill. The legislation would hold lawmakers personally liable for paying settlements, rather than allowing them to use taxpayers' money to settle claims.

Such legislation will pose little threat to the bank accounts of the millionaires and billionaires—both men and women—who inhabit the halls of the US Congress. Likewise, the pending attack on Planned Parenthood and other health care providers under Title X will have zero effect on senators and representatives, who are well insured and have access to the best health care money can buy.

While Trump seeks to deny women's health care services, the US maternal mortality rate has increased by more than 50 percent since 1990, placing the nation in the company of some of the world's poorest nations in sub-Saharan Africa.

The defense of abortion and reproductive rights is a social question that must be resolved in the arena of the class struggle. As the wealth gap between affluent women and working-class women has widened dramatically over the past several decades, so too has social and income inequality—with the chasm growing between a tiny wealthy elite and the vast majority of ordinary Americans.

Such social rights must be defended by the working class in opposition to the ruling class and its political representatives, both Democratic and Republican, in the fight for a socialist program that places human rights above the capitalist drive for profit.



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