The Status of Women’s Reproductive Rights in the United States

Who Decides?

19TH EDITION
JANUARY 2010

www.ProChoiceAmerica.org

NARAL PRO-CHOICE AMERICA FOUNDATION

1156 15th Street, NW
Suite 700
Washington, DC 20005
202.973.3000

www.ProChoiceAmerica.org
In North Carolina we had a major victory in 2009. We helped pass the Healthy Youth Act which provides access to age-appropriate comprehensive sex education for middle-school students. For the first time in 13 years students in North Carolina will receive the objective and scientifically based information they need to make healthy and educated decisions about their futures.

—NARAL PRO-CHOICE NORTH CAROLINA

Virginia severely limits a woman’s right to choose. Women seeking abortion care must not only receive a state-mandated lecture that often includes medically inaccurate information, but they’re also forced to wait 24 hours before having the procedure. Eighty-six percent of Virginia counties have no abortion provider. And to top it all off, Virginia is the home to at least 58 anti-choice crisis pregnancy centers versus only 22 comprehensive reproductive-health-care facilities. The services and options are stacked wholly against women of the Commonwealth.

—NARAL PRO-CHOICE VIRGINIA

While Texas women have a right to choose in principle, in reality there are abortion providers in only seven percent of counties — forcing women to drive several hundred miles and make personal sacrifices in order to exercise that legal right, and the hassle is compounded by a mandatory 24-hour delay. The shortage of providers and restrictive state laws greatly hinder access to health care for Texas’s rural women.

—NARAL PRO-CHOICE TEXAS

In Minnesota, we have only one abortion provider serving women outside the metro area. With the 24-hour mandatory-delay law, Minnesota women are forced to drive hundreds of miles, sometimes for TWO full days, to exercise their legal right to choose. The shortage of providers, in conjunction with other anti-choice laws, hinders health-care access for women who live in rural areas.

—NARAL PRO-CHOICE MINNESOTA

In Washington, this year we strengthened our Healthy Youth Act, requiring that the education programs taught in Washington schools are comprehensive, medically accurate, and proven effective. As a result, more young people have the information they need to make safe and healthy decisions.

—NARAL PRO-CHOICE WASHINGTON

In 2009, the Colorado legislature passed laws improving low-income women’s access to affordable contraceptives and prenatal care, helping to prevent unintended pregnancy and support healthy pregnancies. Pro-choice advocates in Colorado also worked tirelessly to increase contraceptive use by women at high risk for unintended pregnancy and to improve reproductive-health services in urban communities — cementing Colorado’s role as a leader in proactive change that turns pro-choice principles into action.

—NARAL PRO-CHOICE COLORADO
### 2010 REPORT CARD
ON WOMEN’S REPRODUCTIVE RIGHTS

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Protect choice in your state!

NARAL PRO-CHOICE ARIZONA
P 602.258.4091
info@ProChoiceArizona.org
www.ProChoiceArizona.org

NARAL PRO-CHOICE CALIFORNIA
P 415.890.1020
info@ProChoiceCA.org
www.ProChoiceCA.org

NARAL PRO-CHOICE COLORADO
P 303.394.1973
Choice@ProChoiceColorado.org
www.ProChoiceColorado.org

NARAL PRO-CHOICE CONNECTICUT
P 860.523.1227
info@ProChoiceCT.org
www.ProChoiceCT.org

NARAL PRO-CHOICE MARYLAND
P 301.565.4154
info@ProChoiceMaryland.org
www.ProChoiceMaryland.org

NARAL PRO-CHOICE MASSACHUSETTS
P 617.556.8800
Choice@ProChoiceMass.org
www.ProChoiceMass.org

NARAL PRO-CHOICE MINNESOTA
P 651.602.7655
info@ProChoiceMinnesota.org
www.ProChoiceMinnesota.org

NARAL PRO-CHOICE MISSOURI
P 314.531.8616
info@ProChoiceMissouri.org
www.ProChoiceMissouri.org

NARAL PRO-CHOICE MONTANA
P 406.442.2057
mtchoice@mt.net
www.ProChoiceMontana.org

NARAL PRO-CHOICE NEW HAMPSHIRE
P 603.228.1224
info@ProChoiceNH.org
www.ProChoiceNewHampshire.org

NARAL PRO-CHOICE NEW MEXICO
P 505.259.0659
info@ProChoiceNM.org
www.ProChoiceNewMexico.org

NARAL PRO-CHOICE NEW YORK
P 212.343.0114
info@ProChoiceNY.org
www.ProChoiceNY.org

NARAL PRO-CHOICE NORTH CAROLINA
P 919.829.9779
info@ProChoiceNC.org
www.ProChoiceNorthCarolina.org

NARAL PRO-CHOICE OHIO
P 216.283.2180
Choice@ProChoiceOhio.org
www.ProChoiceOhio.org

NARAL PRO-CHOICE OREGON
P 503.223.4510
info@ProChoiceOregon.org
www.ProChoiceOregon.org

NARAL PRO-CHOICE SOUTH DAKOTA
P 605.334.5065
info@ProChoiceSD.org
www.ProChoiceSD.org

NARAL PRO-CHOICE TEXAS
P 512.462.1661
info@ProChoiceTexas.org
www.ProChoiceTexas.org

NARAL PRO-CHOICE VIRGINIA
P 757.287.3356
info@NaralVa.org

NARAL PRO-CHOICE WASHINGTON
P 206.624.1990
info@ProChoiceWashington.org
www.ProChoiceWashington.org

NARAL PRO-CHOICE WISCONSIN
P 608.287.0016
info@ProChoiceWisconsin.org
www.ProChoiceWisconsin.org

NARAL PRO-CHOICE WYOMING
P 307.742.9189
NaralProChoiceWY@netscape.net

NARAL PRO-CHOICE AMERICA
Washington, DC 202.973.3000
www.ProChoiceAmerica.org

NARAL PRO-CHOICE AMERICA FOUNDATION
Washington, DC 202.973.3000
www.ProChoiceAmerica.org
# Table of Contents

## Preface
- Letter from the President i
- Visit the Web ii

## Introduction
- Key Findings: Pro-Choice Legislation and Policy 2-3
- Key Findings: Threats to Choice 4-5
- Key Findings: Political Findings 6-7

## Fast Facts
- Fast Facts About Anti-Choice Laws
  - Near-Total Abortion Bans 10
  - Abortion Bans After 12 Weeks 11
  - Biased Counseling and Mandatory Delays 12
  - Counseling Bans and Gag Rules 13
  - Insurance Prohibition for Abortion 14
  - Refusal to Provide Medical Services 15
  - Restrictions on Low-Income Women’s Access to Abortion 16
  - Restrictions on Young Women’s Access to Abortion 17-18
  - Spousal Consent and Notice 19
  - Targeted Regulation of Abortion Providers (TRAP) 20

- Fast Facts About Pro-Choice Laws
  - Contraceptive Equity 22
  - Emergency Contraception (EC) 23
  - Freedom of Choice Acts 24
  - Guaranteed Access to Prescriptions (GAP) 25
  - Low-Income Women’s Access to Family Planning 26
  - Protection from Clinic Violence 27
  - State Constitutional Protection 28

## Federal Profile

## State Profiles

## Conclusion
- Methodology 84-86
- Acknowledgments and Disclaimer 87
- NARAL Pro-Choice America Foundation State Affiliates 88-89
- Mission Statements and Diversity Policy 90
- Notes 91-92

Through his life’s work, Dr. George Tiller compassionately and heroically served women from all across the country in order to ensure their right to reproductive-health services. Dr. Tiller often spoke of his values – kindness, courtesy, justice, love, and respect – which he brought with him to work everyday. Although frequently the target of attacks, he never wavered in his commitment to those values and to the women he served. NARAL Pro-Choice America Foundation is deeply grateful for his work and will greatly miss his contributions to the pro-choice cause.

***

Abortion providers everywhere bravely make available much-needed health-care services, often under hostile conditions. Providers frequently face harassment in the form of stalking, clinic vandalism, bombings, and death threats so that women can access safe, legal abortion care. For many, bulletproof vests have become a standard part of their daily work uniform. These harsh realities only exacerbate the shortage of abortion providers nationwide. Without these courageous providers, the right to choose would be effectively meaningless.

***

Sen. Edward Kennedy dedicated his life to social justice, ensuring that every American had a voice in government. He was particularly vocal on behalf of the poor, workers, the elderly, children, and women, who otherwise often found themselves locked out of Washington’s corridors of power. During his career in the Senate, he was the author of several hundred bills that became law and helped improve the quality of life for many Americans. Among other laws, he authored the Freedom of Access to Clinic Entrances (FACE) Act of 1994, which guaranteed women entry to reproductive-health facilities free of violent threats and blockades. Sen. Kennedy will be remembered through his momentous contributions to society for generations to come.
From the President

On January 20, 2009, a bright, chilly winter day, I stood and watched President Barack Obama take the oath of office. After eight long years of a White House that relentlessly attacked a woman’s right to choose, the pro-choice American majority finally said, “Enough.” And within days of that swearing-in ceremony, President Obama began to undo eight years of damage. He repealed the global gag rule, fixed the birth-control price crisis, re-funded the U.N. population program, and took steps to repeal Bush’s eleventh-hour attack on reproductive rights, the Federal Refusal Rule.

That’s not all. President Obama selected former NARAL Pro-Choice America Legal Director Dawn Johnsen for a senior Justice Department position, and his very first judicial nominee, David Hamilton, issued pro-choice rulings as a district-court judge. This summer, Justice David Souter made national headlines when he announced his retirement from the Supreme Court. NARAL supported President Obama’s nomination of Justice Souter’s successor, Judge Sonia Sotomayor, the first Latina nominee to the Supreme Court. These wins at the federal level, however, were overshadowed quickly by anti-choice lawmakers’ audacious attacks on our reproductive freedom in Congress’ health-reform legislation. Although the battle over health reform remains unfinished as I write this, the Stupak-Pitts amendment, if included in final legislation, would represent the most serious rollback of a woman’s right to choose in a generation. The fact that the House of Representatives voted by a 46-vote margin in its favor should be a wake-up call to all Americans who value their reproductive rights. And in many states across the country, the right to choose hangs in the balance. One state, Arizona, illustrates the dire situation many women in the United States face, even with a pro-choice president.

In the past year, we lost an important pro-choice champion in Arizona. When Gov. Janet Napolitano left the state house to head the Department of Homeland Security, anti-choice Jan Brewer moved into the top job in that state. While governor, Napolitano consistently vetoed dangerous anti-choice legislation. With this change in leadership, the anti-choice Arizona legislature was able to enact three dangerous anti-choice measures within just six short months of Gov. Napolitano’s departure. These measures attacked Arizonan women’s access to both abortion and contraception, imposing new burdens on the right to choose where they didn’t exist before. Arizona’s case is a chilling reminder of the importance of having pro-choice lawmakers at all levels of government.

The 19th edition of Who Decides? The Status of Women’s Reproductive Rights in the United States reflects these challenges that women faced in 2009, and highlights opportunities to improve and secure pro-choice policies in the states.

As we look forward to the coming year, we take stock of our situation. We continue to fight against attacks on reproductive rights in Congress’ health-reform plan. We continue to hold lawmakers accountable for their cynical and unrelenting assaults on the right to choose. We continue to mourn the loss of Dr. George Tiller, whose absence is felt across the country. We stand by abortion providers, whose numbers are diminishing across the country in the face of restrictive laws and outbreaks of violence at health centers. And we celebrate each policy victory – whether at the state or federal level – as a win for women everywhere.

We are at an historic moment. Positive change for women is within our grasp, but we can’t take anything for granted – nor can we ignore the fact that opponents of freedom will go to great lengths to construct roadblocks on our path to progress, as we’ve seen firsthand in the battle for responsible health-care reform. In order to realize the full promise of that historic day in January, we must act on our values and build the collective strength of America’s pro-choice majority for generations to come.

Sincerely,

Nancy Keenan
President
NARAL Pro-Choice America Foundation
Visit the Web
for the following information and more!

www.ProChoiceAmerica.org/whodecides

Be sure to check out the online edition of *Who Decides?*, which is updated daily and contains additional information about laws and bills, and the status of women’s reproductive rights nationwide.

Exclusive online features include:

- complete summaries of laws, regulations, and other policies—including detailed descriptions, citations, and relevant case information
- summaries of pending legislation in each state, organized by issue area
- our “Did You Know?” feature, which highlights interesting facts about choice in each state
- nationwide snapshots of each issue area, via user-friendly maps and summary charts
- daily updates to our Fast Facts pages, statute summaries, maps and charts, and other features as new laws are enacted, cases are decided, and bills move through state legislatures
- opportunities to take action, via our Choice Action Network
INTRODUCTION
NARAL Pro-Choice America Foundation supports a wide range of pro-choice policies that help protect every woman’s right to make the full range of reproductive choices, including preventing unintended pregnancy, bearing healthy children, and choosing safe, legal abortion.

In 2009, our nationwide Prevention First initiative continued to gain support, and helped create new laws aimed at making abortion less necessary by preventing unintended pregnancies. Pro-choice advocates challenged lawmakers to stand with us and unify behind commonsense prevention policies that would guarantee women’s access to birth control at pharmacies, require equitable insurance coverage for contraception, prevent teen pregnancy, ensure age-appropriate and medically accurate sex education in schools, expand low-income women’s access to family-planning services, and increase women’s awareness of and ability to obtain emergency contraception, also known as the “morning-after” pill. In 2009, lawmakers across the country put prevention first and prioritized women’s health over politics.

In addition to being another important year for prevention efforts, 2009 saw states continue their focus on expanding access to health-care services for women who choose to become parents. Six states enacted laws to help women have healthier pregnancies. This includes measures that expand coverage for Medicaid-funded services for low-income pregnant women and establish programs for engaging at-risk pregnant women, as well as pregnant legal immigrants.

In 2010, when anti-choice advocates likely will try to impose new restrictions on abortion that could test the court’s interpretation of the constitutional right to choose, NARAL Pro-Choice America Foundation, our affiliates, and our allies will work to defeat those divisive measures that pose such serious threats to women’s health. We will also demonstrate that we have the commonsense position on not only abortion, but on a whole range of other issues—including preventing unintended pregnancies and expanding access to reproductive-health care for all women.

**KEY FINDINGS: Pro-Choice Policy**

Measures enacted:
- 14 states and the District of Columbia enacted 21 pro-choice measures in 2009; seven of these were Prevention First measures.
- Colorado enacted the most pro-choice legislation in 2009, with five measures.
KEY PREVENTION FIRST AND OTHER VICTORIES IN 2009

- Utah enacted a law that ensures that sexual-assault survivors receive information about and access to emergency contraception in emergency rooms.
- California, Colorado, Connecticut, Iowa, Montana, and Oregon enacted laws that promote healthy childbearing.
- Wisconsin enacted a law that requires health-insurance plans that provide prescription medication benefits to cover contraceptives and both pharmacies and pharmacists to fill valid prescriptions.

ProChoiceAmerica.org
In 2009, anti-choice lawmakers continued their relentless attacks on a woman’s right to choose in legislatures throughout the country. At the federal level, anti-choice members of Congress attempted to use health-reform legislation as an opportunity to impose new limitations on women’s reproductive freedom. The House passed a health-reform bill that includes sweeping new restrictions on women’s access to abortion care, including provisions that would even make it virtually impossible for women purchasing insurance in the new health-care system with their own, private funds to obtain abortion coverage. At the time of this publication’s printing, the Senate had not yet passed its version of the bill; however, several threats continue to loom, including a similar ban as well as measures that would grant broad license to health-care providers and entities (including hospitals, HMOs, and insurance companies) to refuse to provide or cover medical services and proposals to reinstate funding for failed “abstinence-only” programs.

At the state level, among the several newly enacted anti-choice laws, two states implemented measures that ban a safe, medically appropriate abortion procedure with no exception to protect a woman’s health – laws that are enforceable due to the Supreme Court’s decision to reverse precedent and uphold the Federal Abortion Ban in 2007. In addition, several states considered so-called “personhood” measures intended to impose near-total bans on abortion. These bills gained traction in some legislatures; fortunately, however, no states enacted such provisions.

In addition to the several states that considered bills that would place bans on access to abortion, states also considered and enacted a wide variety of other anti-choice bills, including those that support discredited and dangerous “abstinence-only” programs, block women’s access to birth control, force providers to tell women ideological and factually incorrect information about abortion care, restrict young women’s access to abortion services, and place unnecessary and burdensome requirements on abortion providers. Puzzlingly, anti-choice legislators continued their insistence on opposing measures to prevent unintended pregnancy and therefore reduce the need for abortion, while instead focusing on divisive measures to make abortion care more difficult to obtain for women who need and choose it. In addition, several courts upheld anti-choice state provisions in question, further legitimizing these harmful laws and opening the door for other states to enact similarly restrictive measures.

Even with Roe’s core protections still in place, 87 percent of counties in the United States have no abortion provider, according to The Guttmacher Institute. But opponents of choice are not satisfied, pushing forward with legislative measures that run the gamut from granting pharmacists the right to refuse to fill birth-control prescriptions to outright bans on abortion in all circumstances, even when a woman’s health is in danger.

**Measures enacted:**
- 14 states enacted 29 anti-choice measures in 2009.
- Arkansas enacted the most anti-choice legislation in 2009, with four measures.

**Anti-choice legislation enacted in 2009 included:**
- Both Arkansas and Arizona enacted legislation that bans a safe, medically appropriate abortion procedure with no exception to protect a woman’s health. These laws have only limited exceptions to protect a woman’s life.
- Arizona enacted an omnibus anti-choice law that, among other things, mandates notarized parental notice prior to a young woman obtaining an abortion, requires women to receive a state-mandated lecture prior to obtaining abortion care and prohibits abortion unless women wait an additional 24 hours after receiving the lecture, forbids certain qualified health-care professionals from providing abortion services, and allows certain individuals or entities to refuse to provide abortion services and to refuse to provide or dispense contraceptives. (A court enjoined several of these provisions in September 2009.)
- Virginia enacted a law that establishes “Choose Life” license plates. A portion of the proceeds from these plates funds anti-choice organizations known as “crisis pregnancy centers” that target women considering abortion and often mislead, coerce, and intimidate them.
KEY FINDINGS: Political Findings

CHOICE POSITIONS OF EXECUTIVES

Federal Government
- President Barack Obama is pro-choice.
- Vice President Joe Biden is mixed-choice.

Governors
- 17 governors are pro-choice: CT, IL, IA, KS, ME, MD, MA, MI, MT, NH, NM, NY, NC, OR, PA, WA, WI.
- 12 governors are mixed-choice: AR, CA, CO, DE, HI, KY, MO, OH, OK, TN, VT, WY.
- 21 governors are anti-choice: AL, AZ, AK, FL, GA, ID, IN, LA, MN, MS, NE, NV, NJ, ND, RI, SC, SD, TX, UT, VA, WV.
- The choice position of the mayor of the District of Columbia is unknown.

Choice Positions of Governors

CHOICE POSITIONS OF LEGISLATURES

U.S. Congress
- The choice composition of the U.S. Senate is:
  - 41 pro-choice senators
  - 19 mixed-choice senators
  - 40 anti-choice senators
- The choice composition of the U.S. House is:
  - 185 pro-choice members
  - 47 mixed-choice members
  - 203 anti-choice members

State Legislatures
- Legislatures that are solidly anti-choice still outnumber solidly pro-choice legislatures:
  - 10 states and the District of Columbia have pro-choice legislatures (both the house and senate are pro-choice): CA, CO, DC (Council), HI, ME, MA, NH, NJ, OR, VT, WA.
  - 16 states have anti-choice legislatures (both the house and senate are anti-choice): AL, AZ, ID, KY, LA, MI, MS, MO, MT, NE, ND, OK, SD, TN, TX, UT.
- Choice composition of state senates:
  - 14 states have a pro-choice senate (and the District of Columbia Council is pro-choice): CA, CO, DE, DC, HI, IA, ME, MA, MN, NH, NJ, OR, VT, WA, WI.
  - 16 states have a mixed-choice senate: AK, AR, CT, FL, GA, IL, KS, MD, NV, NM, NY, NC, PA, SC, VA, WV.
  - 20 states have an anti-choice senate: AL, AZ, ID, IN, KY, LA, MI, MS, MO, MT, NE, ND, OH, OK, RI, SD, TN, TX, UT, WY.
- Choice composition of state houses:
  - 12 states have a pro-choice house: CA, CO, HI, ME, MD, MA, NH, NJ, NY, OR, VT, WA.
  - 17 states have a mixed-choice house: AR, CT, DE, IL, IN, IA, MN, NV, NM, NC, OH, PA, RI, SC, WV, WI, WY.
  - 20 states have an anti-choice house: AL, AK, AZ, FL, GA, ID, KS, KY, LA, MI, MS, MO, MT, ND, OK, SD, TN, TX, UT, VA.
There are five states with pro-choice governments (both a majority of the legislature and the governor are pro-choice): ME, MA, NH, OR, WA.

There are 10 states with anti-choice governments (both a majority of the legislature and the governor are anti-choice): AL, AZ, ID, LA, MS, NE, ND, SD, TX, UT.

The terms “house” and “senate” include the equivalent bodies in states that have different titles for their state legislative bodies. Nebraska has a unicameral body that is counted as a senate.
FAST FACTS ABOUT ANTI-CHOICE LAWS
Near-Total Abortion Bans

Q: Could the government really outlaw abortion if the U.S. Supreme Court overturned Roe v. Wade?

A: YES. If Roe vs. Wade were overturned, it would open the door for anti-choice lawmakers in state and federal governments to enact and enforce laws banning abortion. In fact, some states already have abortion bans on the books, either from before Roe or because they enacted laws after Roe hoping to prompt the Supreme Court to overturn it. Currently, these bans are unenforceable; however, if Roe is overturned they will immediately become enforceable. Still other states have anti-choice legislatures and governors that are likely to enact abortion bans if Roe is overturned.

CURRENT STATE LAWS
15 states have unconstitutional and unenforceable near-total criminal bans on abortion: AL, AZ, AR, CO, DE, LA, MA, MI, MS, NM, OK, UT, VT, WV, WI.
- 2 of these bans were enacted after Roe v. Wade: LA (1991) and UT (1991).
- 4 states have laws that would impose near-total criminal bans on abortion if the Supreme Court overturned Roe v. Wade (sometimes known as “trigger” bans): LA, MS, ND, SD.

2009 NOTABLE DEVELOPMENTS
Several states considered so-called “personhood” measures intended to impose near-total bans on abortion by claiming that life begins before medically recognized pregnancy. These bills advanced through the legislatures in some states — even passing one chamber, for example, in North Dakota and Montana — but ultimately pro-choice leaders were able to block them. In addition, anti-choice activists worked to place “personhood” initiatives on state ballots. In November 2008, Colorado voters resoundingly defeated the measure; moving forward, similar proposals are likely to appear on several state ballots in the 2010 election cycle. (Print deadlines precluded inclusion of the Colorado initiative in the 2009 edition of Who Decides?)

This information is current as of October 30, 2009. For updated information, including detailed summaries of all referenced laws and legislation, please visit www.ProChoiceAmerica.org/whodecides. For maps and charts of key issues, please visit www.ProChoiceAmerica.org/yourstate/whodecides/maps.
**Abortion Bans After 12 Weeks**

**Q:** Have politicians succeeded in making abortion illegal in some cases?

**A:** Yes. In 2003, Congress passed the Federal Abortion Ban, which outlaws certain safe, medically appropriate abortion services often necessary to protect a woman’s health as early as the 12th week of pregnancy. It has no exception when a woman’s health is in danger. In April 2007, the Supreme Court declared the ban constitutional, thereby upholding this ban on a safe abortion method nationwide. The court’s holding is contrary to its decision in 2000 that declared state bans on so-called “partial-birth” abortion unconstitutional. The court’s decision also gives the green light to states to enact further bans and other restrictions on abortion that disregard women’s health. All of these bans put politicians’ beliefs above a doctor’s medical judgment and would deny some women the health care their doctors believe is safest for them.

**Current State Laws**

- 20 states have unconstitutional and unenforceable bans that could outlaw abortion as early as the 12th week of pregnancy, with no exception to protect a woman’s health: AL, AK, FL, ID, IL, IN, IA, KY, MI, MS, NE, NJ, ND, OK, RI, SC, SD, TN, WV, WI.
- 6 states ban a safe abortion procedure with no health exception: AZ, AR, LA, MO, UT, VA.
- 1 state bans a safe abortion procedure with only a narrow health exception: OH.

**Current Federal Laws**

In November 2003, Congress passed and President Bush signed into law the Federal Abortion Ban, which bans a safe abortion procedure, with no exception to protect a woman’s health. The ban applies nationwide, even in states that have chosen not to enact these types of bans or that have constitutional or statutory protection for the right to choose that exceeds the protection provided by the federal Constitution. In April 2007, the U.S. Supreme Court upheld the Federal Abortion Ban.

**2009 Enacted State Legislation**

- 2 states enacted measures that ban a safe, medically appropriate abortion procedure with no exception to protect a woman’s health: AZ, AR.

**2009 Notable Cases**

In June 2009, the 11-member Fourth Circuit Court of Appeals upheld Virginia’s ban on a safe, pre-viability abortion procedure in Richmond Medical Center v. Herring. Ruling on the basis that the Virginia law did not constitute an undue burden on a woman’s right to choose under the Supreme Court’s new standard, the court reversed an earlier decision issued by a three-member panel that had found the ban’s language so vague that it could have outlawed the most common abortion methods as early as the second trimester.

**2009 Notable Developments**

After the Supreme Court reversed precedent and upheld the Federal Abortion Ban in 2007, observers expected states to rush to enact newly enforceable abortion-procedure bans consistent with the federal law. In 2009, their predictions began to take shape: state legislatures, as well as the courts, approved measures restricting women’s access to certain abortion procedures in accordance with the Federal Abortion Ban, as illustrated by the Arizona and Arkansas laws and the Virginia case.
Biased Counseling and Mandatory Delays

Q: What are biased-counseling and mandatory-delay laws, and how do they endanger women's health?

A: Biased-counseling and mandatory-delay laws prohibit women from receiving abortion care until they are subjected to a state-mandated lecture and/or materials followed by a delay of usually at least 24 hours. A woman considering abortion, like any patient, should receive full and unbiased information from her doctor about her medical options. However, these laws not only represent unnecessary government intrusion into private decisions and the doctor-patient relationship, they often require that women be provided with medically inaccurate information, such as the disproven claim that abortion causes breast cancer. Mandatory delays create additional burdens for women, especially women in rural areas who often have to travel for many hours to reach a health-care provider, and for women who do not have the resources to take extra time off work or pay for child care. Finally, mandatory-delay laws endanger women's health by creating unnecessary burdens that can impede earlier, and therefore safer, abortion care.

32 states have laws that subject women seeking abortion services to biased-counseling requirements and/or mandatory delays: AL, AK, AZ, AR, DE, FL, GA, ID, IN, KS, KY, LA, MA, MI, MN, MS, MO, MT, NE, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WV, WI.

8 of these laws have been found fully or partially unconstitutional by courts: AZ, DE, KY, MA, MI, MT, SD, TN.

3 states enacted 3 measures related to biased counseling and/or mandatory delays: AZ, ND, UT.

In August 2009, on remand from the Eighth Circuit Court of Appeals, a federal district court ruled in Planned Parenthood MN, ND, SD v. Rounds that South Dakota’s biased-counseling law was partially enforceable and partially unenforceable. The law, passed in 2005, required providers to tell a woman that abortion ends “the life of a whole, separate, unique, living human being,” that she has a relationship with the “unborn human being,” and that abortion increases the likelihood of suicide. The most recent decision upheld the portion of the law forcing providers to tell the woman that abortion ends “the life of a whole, separate, unique, living human being,” but struck down the portions relating to the relationship with the “unborn human being” and the increased risk of suicide.

In September 2009, in Planned Parenthood Arizona, Inc. v. Goddard, a state superior court blocked portions of Arizona’s new biased-counseling/mandatory-delay law. The decision allows the state to enforce a new 24-hour mandatory delay before women can access abortion services, but enjoins a provision that the state-mandated counseling and materials be provided in person, thereby blocking enforcement of a two-trip requirement.

Not satisfied with the current biased counseling to which women seeking abortion services are subjected, anti-choice legislators have been pushing to add even more ideological language. The South Dakota law at issue in Planned Parenthood MN, ND, SD v. Rounds requiring providers to tell women that abortion ends “the life of a whole, separate, unique, living human being” has become a model for other states. In 2009, North Dakota enacted a law with identical language. Both houses of the Kansas legislature also passed a bill with the same provision; it was blocked only because then-Gov. Kathleen Sebelius vetoed it.
Counseling Bans and Gag Rules

Q: What are counseling bans and “gag rules,” and how do they impede women’s access to health care?

A: Having access to information about the full range of reproductive options is essential to making informed health-care decisions. Counseling bans, also known as “gag rules,” typically prohibit organizations that receive state and/or federal funds from counseling or referring women for abortion services, hinder doctors from treating their patients responsibly, and severely limit women’s ability to make informed choices. Women and their health-care providers—not politicians—should make private medical decisions.

CURRENT STATE LAWS

20 states have laws that prohibit some or all state employees or organizations that receive state funds from providing counseling or referring women for abortion services: AL, AZ, IL, IN, KS, KY, LA, MI, MN, MS, MO, NE, ND, OH, OK, PA, SC, TX, VA, WI.

North Dakota’s prohibition has been held partially unconstitutional.

CURRENT FEDERAL LAWS

The Federal Refusal Clause is a back-door “gag rule” that allows health-care companies to forbid their doctors from providing medically necessary and appropriate abortion care, or even referring patients to another provider.

2009 FEDERAL ACTION

In January 2009, President Obama issued an executive order repealing the global gag rule. This harmful Bush-era policy prohibited the U.S. Agency for International Development from granting family-planning funds to any overseas health center unless it agreed not to use any funds—including its own, private, non-U.S. funds—to provide, counsel, or refer women for abortion care, or from taking a pro-choice position. Following the repeal of the global gag rule, anti-choice senators attempted to reimpose it legislatively, but failed. In separate action, pro-choice senators voted in committee to include a provision permanently blocking the imposition of the global gag rule by a future president; as of this publication’s printing, the full Senate had not yet voted on this measure.

This information is current as of October 30, 2009. For updated information, including detailed summaries of all referenced laws and legislation, please visit www.ProChoiceAmerica.org/whodecides. For maps and charts of key issues, please visit www.ProChoiceAmerica.org/yourstate/whodecides/maps.
Insurance Prohibition for Abortion

**Q:** What are bans on insurance coverage for abortion, and how do they restrict women’s privacy and choice?

**A:** Anti-choice state and federal legislators have enacted laws prohibiting insurance companies from covering abortion services, or requiring women to pay an extra premium to receive coverage for abortion care. Women should not be denied coverage for reproductive-health services—a basic part of women’s health care—by politicians imposing their personal beliefs on private medical decisions.

**CURRENT STATE LAWS**

17 states prohibit insurance plans for public and/or private employees from covering abortion services: AR, CO, ID, IL, KY, MA, MS, MO, NE, ND, OH, OK, PA, RI, SC, VA, WI.

- **Rhode Island** has two separate insurance-prohibition laws. Courts have declared one unconstitutional and unenforceable and the other partially unconstitutional and unenforceable.

**CURRENT FEDERAL LAWS**

Federal law bars federal employees from selecting a health-care plan that provides abortion coverage. Retired and current military personnel and their dependents are also prohibited from obtaining coverage for abortion care through military health plans, even if a pregnancy resulted from an act of rape or incest.

**2009 FEDERAL ACTION**

In November 2009, the House passed an amendment to health-reform legislation that imposes sweeping new limitations on women’s access to abortion coverage, including restrictions that would, if enacted, make it virtually impossible for women to purchase insurance plans with abortion coverage in the new health-care system, even with their own, private funds. (During committee consideration of the House and Senate bills, several similar amendments were offered as well.) In the current system, nearly 90 percent of private plans cover abortion services. The Senate voted down such a provision, but at the time of this publication’s printing, had not yet completed its version of the bill, so the final result is unknown at this point.

**2009 NOTABLE CASES**

Of the 17 states listed above, five allow women to purchase abortion coverage only by a separate rider at an additional cost: ID, KY, MO, ND, OK. However, the experiences in these states are not promising. Recent research conducted in North Dakota by the National Women’s Law Center found that the private health plan that holds the state’s overwhelming share of the health-insurance market (91 percent) does not offer a rider for abortion coverage. In fact, the state insurance department has no record of abortion riders from any of the leading five individual insurance plans in North Dakota from at least the past decade.

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## Refusal to Provide Medical Services

**Q:** Are health-care providers really allowed to refuse to provide medically necessary services?

**A:** YES. A number of state and federal laws include provisions known as “refusal clauses,” which permit a broad range of individuals and institutions—including hospitals, hospital employees, health-care providers, pharmacists, employers, and insurance companies—to refuse to provide, pay for, counsel for, or even refer patients for medical treatment that they oppose. Although carefully crafted refusal clauses may be acceptable in some circumstances to protect individuals who oppose certain treatments, broad refusal clauses deny women medically necessary information, referrals, and services. In addition, even if individual medical providers are protected, health-care corporations should not be allowed broadly to deny women access to necessary medical services and information.

### CURRENT STATE LAWS

<table>
<thead>
<tr>
<th>States</th>
<th>Allow Certain Individuals or Entities to Refuse to Provide Women Specific Reproductive-Health Services, Information, or Referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>47</td>
<td>AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, WA, WV, WI, WY</td>
</tr>
</tbody>
</table>

Several federal laws allow health-care employees and companies to refuse to provide, pay for, counsel for, or even refer for abortion services—and in some cases contraceptives. Most recently, Congress passed the Federal Refusal Clause, which eliminates federal, state, and local governments’ ability to ensure that abortion care and referrals are available. Under this law, a federal, state, or local government may not require any health-care company to provide, pay for, or refer for abortion services. Any law or regulation that does so can be considered “discrimination” against the entity and a violation of the law.

In addition, in 2009 a Department of Health and Human Services regulation pertaining to refusal rights, proposed by the Bush administration, went into effect. The regulation expands the ability of health-care entities and providers to refuse to provide, cover, or refer for medical services. The Obama administration took the first step toward rescinding the regulation in March 2009, but as of this publication’s printing it remains in effect.

### 2009 ENACTED STATE LEGISLATION

<table>
<thead>
<tr>
<th>States</th>
<th>Measures Modifying Existing Laws that Allow Certain Individuals or Entities to Refuse to Provide Women Specific Reproductive-Health Services, Information, or Referrals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>AZ, LA. Arizona’s new law expands on state abortion refusal rights and adds provisions to allow hospitals, pharmacies, and individuals to refuse to provide birth control. Louisiana’s new law limits the state’s abortion refusal rights by including provisions that account for patients’ access to health-care services and information.</td>
</tr>
</tbody>
</table>

During the health-care reform debate, anti-choice lawmakers attempted to insert several broad refusal clauses into the legislation. Lawmakers in the House passed a bill that codifies the refusal laws already in place for the new health-care system; as of this publication’s printing, the Senate had not yet finalized its version of the bill. Anti-choice senators have threatened, however, to offer measures that would grant broad license to health-care providers and entities (including hospitals, HMOs, and insurance companies) to refuse to provide or cover any medical services — including birth control. Such measures even would allow providers to refuse to offer basic information about patients’ health-care options.

In addition, in April the Senate voted down an amendment to the budget resolution that would have enshrined the principles of a broad refusal law in the context of health reform.

### 2009 NOTABLE CASES

In September 2009, in Planned Parenthood Arizona, Inc. v. Goddard, a state superior court blocked the refusal provisions newly enacted in Arizona. The decision blocks the state’s addition of a refusal clause allowing providers to opt out of providing contraception and the state’s expansion of its abortion refusal clause.

### 2009 NOTABLE DEVELOPMENTS

Despite several laws at the federal level and in 47 states protecting provider rights to refuse services, anti-choice lawmakers continue to push for even broader refusal clauses. Legislators in several states introduced bills that would jeopardize women’s access to birth control and allow entire health-care corporations to deny basic services. In addition to the law that passed in Arizona this year, states such as Rhode Island and Hawaii introduced wide-sweeping measures that would allow insurance companies to refuse to cover even birth control.
Restrictions on Low-Income Women’s Access to Abortion

Q: How do restrictions on access to abortion care disproportionately affect low-income women?

A: All women should have access to reproductive-health care regardless of their economic status, but discriminatory restrictions on public funding make abortion services an unavailable choice for many low-income women. Banning public funding for certain services limits reproductive-health options for those who rely on the government for their health care, putting women’s health in danger and inserting politicians into the doctor-patient relationship.

33 states and the District of Columbia restrict low-income women’s access to abortion: AL, AR, CO, DE, DC, FL, GA, ID, IN, IA, KS, KY, LA, ME, MI, MS, MO, NE, NV, NH, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WI, WY.

17 states fund abortion services for low-income women beyond federal restrictions: AK, AZ, CA, CT, HI, IL, MD, MA, MN, MT, NJ, NM, NY, OR, VT, WA, WV.

Several federal laws, most notably the Hyde amendment, bar access to abortion care for most low-income women who rely on the federal government for their health care, with exceptions only to preserve the woman’s life or if the pregnancy results from rape or incest. Women affected by these bans include recipients of Medicaid, Medicare, the State Children’s Health Insurance Program, Indian Health Service clients, and clients of the District of Columbia’s public health-care programs.

2 states enacted measures restricting low-income women’s access to abortion: AK, CO.

Most of the federal funding bans on abortion services for low-income women described above are extended annually by Congress.

In 2009, however, lawmakers in the House and Senate voted for a bill that repeals the restriction on the District of Columbia’s ability to offer abortion care to low-income women. In addition, the House passed a health-reform bill that imposes sweeping new restrictions on funding for abortion care. It forbids abortion coverage in the proposed new system for both low-income and middle-income women with subsidies, and bans such coverage entirely in the proposed public plan. It forces subsidized customers who want abortion coverage to purchase a supplemental policy at an additional cost — an illogical proposal given that women do not plan to need abortion services and that low-income women cannot afford to spend added funds on a single-service health plan. The full Senate had not yet acted on the health-reform bill as of this publication’s printing, so the outcome of this measure is also yet to be determined.
Restrictions on Young Women’s Access to Abortion

Q: How are abortion restrictions dangerous to young women’s safety?

A: Most young women talk with at least one parent when facing an unintended pregnancy. But some young women feel for various reasons—including abuse, rape, or incest—that they cannot tell a parent that they are pregnant. Restrictions on young women’s access to abortion care can lead to family violence when a young woman must tell an abusive parent about her decision to end a pregnancy, and can delay young women from seeking earlier, safer abortion care, thus putting their health at risk. Of course, most parents hope their daughters will seek out their advice and support, but responsible parents want, above all, for their daughters to be safe.

43 states have parental-notice or -consent laws that restrict young women’s access to abortion: AL, AK, AZ, AR, CA, CO, DE, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NJ, NM, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WV, WI, WV.

23 states require parental consent: AL, AK, AZ, AR, CA, ID, IN, KY, LA, ME, MA, MI, MS, MO, NM, NC, ND, OH, PA, RI, SC, TN, WI.

15 states require parental notice: CO, DE, FL, GA, IL, IA, KS, MD, MN, MT, NE, NV, NJ, SD, WV.

5 states require both parental notice and consent: OK, TX, UT, VA, WI.

11 states that have parental-notice and/or -consent laws permit other trusted adults to stand in for a parent: AZ, CO, DE, IL, IA, ME, NC, PA, SC, VA, WI.

6 of these laws have been found unconstitutional and unenforceable: AK, CA, MT, NV, NJ, NM.

2009 Enacted State Legislation

In July 2009, Arizona passed a law that mandates notarized parental consent in order for a young woman to obtain abortion care. This amends current state law. A pending court case blocked this provision. (For more details, read the “2009 Notable Cases” section below.)

2009 Federal Action

In 2009, lawmakers in the House of Representatives reintroduced yet again the so-called “Child Interstate Abortion Notification Act,” which would impose a complex patchwork of parental-involvement laws on states, doctors, and young women. The bill also imposes criminal penalties on anyone other than a parent—including a grandparent or minister—who accompanies a young woman across state lines for abortion care if requirements of the home state’s parental-involvement law have not been met.

2009 Notable Cases

On July 14, 2009, the Seventh Circuit Court of Appeals, in Zbaraz v. Madigan, dissolved an injunction that had been in place since 1984, enjoining the enforcement of Illinois’ Parental Notice of Abortion Act of 1983. Although the Illinois General Assembly later repealed the 1983 law and passed a new version in 1995, that version also was challenged on constitutional grounds and the injunction remained in effect by agreement of the parties. The Seventh Circuit Court of Appeals ruled that the judicial-bypass procedure put in place under the 1995 law is sufficient. On August 5, the state Medical Disciplinary Board, the agency responsible for enforcement, was granted a 90-day moratorium to allow medical practitioners to become familiar with the requirements of the law. On November 4, a state-court judge issued a temporary restraining order that will remain in effect until arguments are heard. At the time of publication the law had still not gone into effect.

In Planned Parenthood Arizona, Inc. v. Goddard, a Maricopa County Superior Court judge accepted many of the legal arguments offered by Planned Parenthood Arizona, Inc. and blocked enforcement of some portions of a new measure that would have imposed unprecedented restrictions on women seeking abortion care. One of the provisions blocked was a requirement for notarized parental consent in order for young women to obtain abortion care. At the time of publication, this injunction remained in effect.
Restrictions on Young Women’s Access to Abortion

continued on prior page

2009 NOTABLE DEVELOPMENTS

Young women’s ability to access confidential abortion care is still a major target for anti-choice lawmakers and activists, despite the fact that many states already have parental-involvement laws. Anti-choice lawmakers have been thus far unsuccessful in passing stand-alone federal legislation on this point but persist in seeking legislative opportunities to do so — such as when they filed a version of the “Child Interstate Abortion Notification Act” to a bill reauthorizing the State Children’s Health Insurance Program. (Thankfully, the amendment did not come up.) Furthermore, states continue to chip away at young women’s rights. In addition to the judicial action discussed above, in two states that have unconstitutional and unenforceable parental-involvement laws on the books — Alaska and California — anti-choice activists have filed parental-notification and waiting-period initiatives to be on the ballot in 2010. All told, anti-choice forces continue to look for ways to erode young women’s access to abortion care.
Spousal Consent and Notice

Q: What are spousal-consent and -notice laws, and how do they restrict women’s access to abortion services and jeopardize women’s health?

A: Spousal-consent and -notice laws require a pregnant woman to obtain written consent from, or give notice to, her husband prior to receiving abortion services. Of course, most couples talk with each other when facing an unintended pregnancy, and we applaud men who are actively involved in such discussions. However, these types of laws are inherently dangerous. A significant number of women are victims of physical and psychological abuse at the hands of their husbands. Consent and notice requirements become a substantial obstacle when a woman fears for her safety and the safety of her children if she must tell an abusive husband about her decision to end a pregnancy. More recent legislation on this issue requires a pregnant woman to obtain consent from, or give notice to, the man involved in the pregnancy regardless of her relationship with him. Such a requirement can delay a woman from seeking earlier, safer abortion care, thus putting her health at risk.

CURRENT STATE LAWS

8 states have unconstitutional and unenforceable laws that require women to obtain written consent from, or give notice to, her husband prior to receiving abortion care: CO, IL, KY, LA, ND, PA, RI, SC.

2009 NOTABLE DEVELOPMENTS

In 2009, Ohio introduced a spousal-consent bill that would have required a woman to obtain permission from the man involved in the pregnancy before she could get an abortion. If she did not know the man’s identity, she would be compelled to pay for and participate in a paternity test. To make matters worse, if she did not get the signed permission of the man involved, or present a man not responsible for the pregnancy with the permission slip, she would be guilty of “abortion fraud,” which is a first-degree misdemeanor, and could serve six to 12 months in jail if found guilty.
Targeted Regulation of Abortion Providers (TRAP)

Q: What are TRAP laws, and how do they impede women’s access to health-care services?

A: The anti-choice movement has undertaken a campaign to impose unnecessary and burdensome regulations on abortion providers—but not other medical professionals—in an obvious attempt to drive doctors out of practice and make abortion care more expensive and difficult to obtain. Such proposals are known as TRAP laws: Targeted Regulation of Abortion Providers. Common TRAP regulations include those that restrict where abortion care may be provided. Regulations limiting abortion services to hospitals or other specialized facilities, rather than physicians’ offices, require doctors to obtain medically unnecessary additional licenses, needlessly convert their practices into mini-hospitals at great expense, or provide abortion services only at hospitals, an impossibility in many parts of the country.

44 states and the District of Columbia have laws subjecting abortion providers to burdensome restrictions not applied to other medical professionals: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KY, LA, ME, MD, MA, MI, MN, MS, MO, NE, NV, NJ, NM, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, TX, UT, VA, WA, WI, WY.
- All of these states prohibit certain qualified health-care professionals from providing abortion care.
- 25 of these states restrict the provision of abortion care—often even in the early stages of pregnancy—to hospitals or other specialized facilities: AK, AR, CT, GA, ID, IN, MA, MN, MS, MO, NV, NJ, NY, NC, ND, OH, OK, PA, RI, SC, SD, TN, UT, VA, WI.
- 15 of these laws are at least partially unenforceable: AK, AZ, ID, IL, MA, MS, MO, NY, ND, OH, OK, PA, TN, UT, WI.

1 state enacted 1 measure that subjects abortion providers to burdensome restrictions not applied to other medical professionals: AZ.

In September 2009, in Planned Parenthood Arizona, Inc. v. Goddard, a state superior court temporarily enjoined Arizona’s new law prohibiting certain qualified health-care professionals from providing abortion care.

The South Dakota Senate considered a bill that would have required physicians providing abortion care to be physically present in the town where the surgery would take place 24 hours in advance of the procedure. Because no local doctors currently provide abortion services in South Dakota, doctors must travel there from other states. Mandating that physicians arrive a day early but not provide medical care during that time would have unnecessarily increased a medical facility’s operational expenses, and thereby, increased the cost of an abortion. Had the bill been enacted, it could have made it impossible for doctors who work in multiple states during the week to provide care to South Dakotan women, effectively resulting in a statewide abortion ban.
FAST FACTS ABOUT PRO-CHOICE LAWS
Contraceptive Equity

Q: Why is insurance coverage for contraception important to women’s health?

A: Laws promoting insurance coverage for contraception are crucial to protecting and promoting women’s reproductive health. By guaranteeing that insurers cover prescription contraception to the same extent as other medications, contraceptive-equity laws help ensure women’s access to birth control and ultimately help prevent unintended pregnancies and reduce the need for abortion.

27 states have passed comprehensive laws or regulations ensuring equity in private insurance coverage for prescription contraception: AZ, AR, CA, CT, DE, GA, HI, IL, IA, ME, MD, MA, MI, MO, MT, NV, NH, NJ, NM, NY, NC, OR, RI, VT, WA, WV, WI.

Current law guarantees that Federal Employee Health Benefits (FEHB) plans cover prescription contraception to the same extent as other prescription medications.

1 state enacted 1 measure that would require all state insurance plans that cover prescription medication to include coverage for prescription contraceptives: WI.

Pro-choice lawmakers sponsored the Prevention First Act to ensure that prescription contraceptives are covered equally with other prescription drugs and related medical services. This bill is the cornerstone of the pro-choice Prevention First agenda which aims to prevent unintended pregnancies, and therefore, reduce the need for abortion.

In 2009, Wisconsin approved a provision in the state budget that explicitly requires all insurance plans that cover prescription medication to include equitable coverage for contraception. Wisconsin’s new contraceptive-equity law is in addition to a 2004 ruling by the state Equal Rights Division that an employer’s failure to cover contraceptives constitutes sex discrimination in violation of the Fair Labor Employment Act.

This information is current as of October 30, 2009. For updated information, including detailed summaries of all referenced laws and legislation, please visit www.ProChoiceAmerica.org/whodecides. For maps and charts of key issues, please visit www.ProChoiceAmerica.org/yourstate/whodecides/maps.
Emergency Contraception (EC)

Q: What is emergency contraception, and why is it important to women’s health?

A: Emergency contraception (EC), often referred to as the “morning-after” pill, contains the same active ingredients as ordinary birth-control pills and can significantly reduce a woman’s chance of becoming pregnant if taken soon after sex. EC can prevent a pregnancy before it occurs; it has no effect on an existing pregnancy. It may be used when other birth-control methods fail or are not used, such as when women are sexually assaulted. The Food and Drug Administration (FDA) has approved emergency contraception for over-the-counter sales for individuals aged 17 and over. However, many women do not know about EC, and anti-choice groups have fought efforts to improve access to it.

CURRENT STATE LAWS

22 states and the District of Columbia have 34 laws and/or policies that improve women’s access to EC: AK, AR, CA, CO, CT, DC, HI, IL, ME, MD, MA, MN, NH, NJ, NM, NY, OK, OR, SC, UT, VT, WA, WI.

15 states and the District of Columbia have laws that improve sexual-assault survivors’ access to EC or information about EC in hospitals: AR, CA, CO, CT, DC, IL, MA, MN, NJ, NM, NY, OR, SC, UT, WA, WI.

9 states allow pharmacists to provide EC to a woman of any age without a prescription: AK, CA, HI, ME, MA, NH, NM, VT, WA.

9 states provide Medicaid coverage of over-the-counter EC: HI, IL, MD, NJ, NM, NY, OK, OR, WA.

2009 ENACTED STATE LEGISLATION

1 state and the District of Columbia enacted 2 measures improving sexual-assault survivors’ access to EC in hospitals: DC, UT.

2009 FEDERAL ACTION

Lawmakers have sponsored a number of pieces of pro-choice legislation related to EC, including bills to ensure that EC is offered to sexual-assault survivors in hospitals and to make EC available to women in the military. The Prevention First Act also contains several provisions that would improve women’s access to EC. Unfortunately, anti-choice lawmakers have blocked these measures.

2009 NOTABLE CASES

In March 2009, in Tummino v. von Eschenbach (formerly Tummino v. Crawford), a U.S. district court ordered the FDA to reconsider its controversial decision to limit over-the-counter access to the emergency contraceptive Plan B® to adults age 18 and older, finding that the age restriction was based on politics and ideology, not scientific evidence. The decision required that Plan B® be made available to 17-year-olds over the counter, without a prescription, and in April 2009, the FDA announced that it would comply with this ruling. In addition, the ruling charged the agency to reassess whether to make the medication available to individuals of all ages without a prescription.

2009 NOTABLE DEVELOPMENTS

In June 2009, the FDA approved the first-ever generic version of the emergency contraceptive Plan B® for prescription use for individuals ages 17 and under. In August, the FDA approved the generic medication for over-the-counter use for individuals 17 and over.
Freedom of Choice Acts

**Q:** What are Freedom of Choice Acts, and why do states need to codify Roe’s protections?

**A:** In *Roe v. Wade*, the U.S. Supreme Court ruled that the Constitution guarantees a woman’s right to choose. However, in subsequent decisions the Supreme Court sharply limited some of *Roe’s* protections and could someday eliminate them entirely. A Freedom of Choice Act (FOCA) helps to ensure that a woman’s right to choose is preserved by making *Roe’s* protections a permanent part of state or federal law. Women in states with FOCA—or women nationwide if Congress were to pass a federal version—would continue to have access to safe, legal abortion care, even if *Roe* is further eroded or overturned in the courts. However, if the Supreme Court overturned or eviscerated *Roe* without a FOCA in place, Congress would be able to ban abortion in some or all circumstances nationwide, trumping state codifications of *Roe’s* protections.

<table>
<thead>
<tr>
<th>CURRENT STATE LAWS</th>
<th>7 states have codified a woman’s right to choose, making the protections of <em>Roe v. Wade</em> part of state law: CA, CT, HI, ME, MD, NV, WA.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>■ 3 states enacted these measures by ballot initiative: MD, NV, WA.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2009 NOTABLE DEVELOPMENTS</th>
<th>In 2009, 11 states (AL, GA, IL, IN, LA, MO, MT, NE, ND, OH, OK) considered 15 non-binding resolutions opposing the federal Freedom of Choice Act. Four states approved five resolutions: GA, MO, ND, OK.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Given that FOCA had not even been reintroduced in Congress at the time of these measures’ introduction and passage, it seems clear that the anti-FOCA campaign was a transparent attempt by anti-choice activists and legislators to shift focus from their opposition to the pro-choice community’s prevention agenda.</td>
</tr>
</tbody>
</table>
Guaranteed Access to Prescriptions

Q: What can be done about pharmacists who refuse to fill women’s prescriptions for birth control?

A: Laws that guarantee women’s access to prescriptions are becoming increasingly necessary to address the growing issue that some pharmacists refuse to fill women’s legally prescribed birth control. Some pharmacists even go so far as to lecture women, humiliate them at the counter, or refuse to hand back a prescription. When a woman walks into a pharmacy with a birth-control prescription from her doctor, she should walk out with the medication—without intimidation, delay, or harassment.

CURRENT

<table>
<thead>
<tr>
<th>STATE LAWS</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 states guarantee that women’s birth-control prescriptions will be filled: CA, IL, ME, NV, NJ, WA, WI.</td>
</tr>
<tr>
<td>Washington’s rule also requires pharmacies to dispense over-the-counter emergency contraception.</td>
</tr>
</tbody>
</table>

ENACTED STATE

<table>
<thead>
<tr>
<th>LEGISLATION</th>
</tr>
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<tbody>
<tr>
<td>1 state enacted 1 measure guaranteeing that women’s birth-control prescriptions will be filled: WI.</td>
</tr>
</tbody>
</table>

2009 NOTABLE CASES

In November 2007, in Storman’s Inc. v. Selecky, the U.S. District Court for the Western District of Washington granted pharmacists’ motion for a preliminary injunction against Washington’s pharmacy board’s rule that requires pharmacists to dispense drugs and devices approved by the Food and Drug Administration. In July 2009, the Ninth Circuit Court of Appeals lifted the injunction and the law took effect immediately, but the case was remanded back to the district court for further consideration.

In December 2008, in Morr-Fitz, Inc. v. Blagojevich, the Supreme Court of Illinois reversed a lower court’s dismissal of pharmacists’ challenge to the Illinois rule guaranteeing women’s access to birth-control prescriptions, sending the case back to the lower courts without ruling on the merits of the regulation. In April 2009, a county circuit court judge issued a temporary restraining order against the statute as it applies to the pharmacies who are parties to the suit, until the judge hears the pharmacists’ objections.

2009 NOTABLE DEVELOPMENTS

In the face of laws — including a federal rule that went into effect just this year — that allow providers broad license to refuse to provide basic medical services, pro-choice measures that guarantee women’s access to birth control have become even more essential. Considering that the vast majority of women use birth control at some point in their lives, access to this basic and necessary medication should be routine, not subject to government or corporate interference.
Low-Income Women’s Access to Family Planning

Q: How can low-income women access costly family-planning services?

A: All women should have access to basic reproductive-health care regardless of their income, but the high cost of health care and health insurance makes family-planning services unavailable to many women. Title X is the federal program that provides essential funding to family-planning clinics that serve many low-income women. Also, some states have improved coverage for family-planning services by applying for and receiving a waiver from the federal government’s Medicaid program. States that obtain a waiver are able to expand certain eligibility requirements for Medicaid-funded family-planning services and thus provide more women with access to this basic medical care.

CURRENT STATE LAWS

27 states currently provide certain low-income women coverage for Medicaid-funded reproductive-health services through a waiver obtained from the Department of Health and Human Services, Centers for Medicare and Medicaid Services: AL, AZ, AR, CA, DE, FL, IL, IA, LA, MD, MI, MN, MS, MO, NM, NY, NC, OK, OR, PA, RI, SC, TX, VA, WA, WI, WY.

Note: The breadth and scope of each waiver varies greatly from state to state.

CURRENT FEDERAL LAWS

Title X of the Public Health Service Act grants federal funds to family-planning clinics that provide reproductive-health services to low-income women, uninsured women, and women who cannot qualify for Medicaid. For many women, Title X clinics provide the only basic health care that they receive.

2009 FEDERAL ACTION

The Prevention First Act contains a number of preventive-health and education measures designed to reduce the number of unintended pregnancies and, therefore, the need for abortion. Among other provisions, this bill would increase funding for the national family-planning program, Title X, and expand Medicaid family-planning services to cover more low-income women. Pro-choice lawmakers also included a provision in health-reform bills that would allow states to expand access to Medicaid family-planning services for low-income women without having to obtain a waiver. The House passed a health-reform bill that incorporated this measure; the Senate bill sent to the floor for debate also included it, but as of this publication’s printing, the Senate had not yet voted on its version of the bill.

This information is current as of October 30, 2009. For updated information, including detailed summaries of all referenced laws and legislation, please visit www.ProChoiceAmerica.org/whodecides.

For maps and charts of key issues, please visit www.ProChoiceAmerica.org/yourstate/whodecides/maps.
Protection from Clinic Violence

Q: Why are specific laws needed to address violence directed at reproductive-health providers and their patients?

A: Women’s painful, real-world experiences have shown that general laws prohibiting violence and intimidation do not provide sufficient protection against the unlawful and often violent tactics used by some opponents of abortion rights. Laws protecting women and providers from violence and intimidation are critical to preserving the right to choose and ensuring that reproductive-health clinics remain operable. The federal Freedom of Access to Clinic Entrances Act (FACE) and similar state clinic-protection laws provide this critical protection.

CURRENT STATE LAWS

16 states and the District of Columbia have laws that protect health-care facilities, providers, and/or patients from blockades, harassment, and/or other violence: CA, CO, CT, DC, KS, ME, MD, MA, MI, MN, MT, NV, NY, NC, OR, WA, WI.

3 of these states have buffer zones that protect patients and clinic personnel from unwanted harassment within specified distances from clinics: CO, MA, MT.

CURRENT FEDERAL LAWS

The Freedom of Access to Clinic Entrances Act (FACE) provides federal protection against the unlawful and often violent tactics used by abortion opponents. It provides civil remedies and criminal penalties for a range of violent, obstructive, or threatening conduct directed at reproductive-health providers and patients. Courts repeatedly have upheld the law as constitutional, and experts credit FACE as a significant factor in reducing clinic violence.

2009 ENACTED STATE LEGISLATION

1 state enacted 1 measure that would extend its current clinic-violence protection law to protect reproductive-health professionals at their residences: NC.

2009 NOTABLE DEVELOPMENTS

On May 31, Dr. George Tiller, an abortion provider in Kansas, was murdered while serving as an usher in his church. Dr. Tiller’s death marks the first murder of an abortion provider since the killing of Dr. Barnett Slepian in 1988. In response, the Department of Justice, in coordination with the office of the Sedgwick County District attorney (KS), launched a federal investigation into the case to assess potential violations of the FACE Act and/or other federal statutes.

This information is current as of October 30, 2009. For updated information, including detailed summaries of all referenced laws and legislation, please visit www.ProChoiceAmerica.org/whodecides. For maps and charts of key issues, please visit www.ProChoiceAmerica.org/yourstate/whodecides/maps.
State Constitutional Protection

Q: Can a state constitution provide broader protection for the right to choose than the federal Constitution does?

A: Yes. Women’s freedom and privacy are protected by the Constitution, as interpreted by the U.S. Supreme Court in the historic Roe v. Wade decision. However, an increasingly hostile Supreme Court has allowed more and more restrictions on those rights, allowing politicians and others to infringe on private medical decisions in a myriad of ways. Fortunately, a number of state courts have ruled that their state constitutions provide stronger protections for the right to privacy and the right to choose than the U.S. Constitution. If Roe were overturned, these states may be able to ensure that women have continued access to safe, legal options. Nonetheless, if there were no federal constitutional protection for choice, Congress would be able to ban abortion nationwide, trumping state constitutional protections.

16 states’ constitutions provide greater protection of a woman’s right to choose than does the federal Constitution: AK, AZ, CA, CT, FL, IL, IN, MA, MN, MT, NJ, NM, OR, TN, VT, WV.
FEDERAL PROFILE
**U.S. FEDERAL GOVERNMENT**

**Federal Political Information**

**EXECUTIVES**
President Barack Obama (D) is pro-choice.
Vice President Joe Biden (D) is mixed-choice.

**CONGRESS**
The U.S. Senate is under pro-choice control.
The U.S. House of Representatives is under pro-choice control.

**Federal Laws in Brief**

*This information is current as of November 30, 2009.* For up-to-date information and detailed summaries, please visit the federal Who Decides? web page.

**Anti-Choice Laws**

**ABORTION BAN**
Federal law bans a safe abortion procedure.

**INSURANCE PROHIBITION FOR ABORTION**
Federal law restricts insurance coverage for abortion for federal employees.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Federal law allows some health-care corporations to refuse to provide women specific reproductive-health services, information, or referrals.

**Pro-Choice Laws**

**CONTRACEPTIVE EQUITY**
Federal law requires health-insurance plans in the Federal Employees Health Benefits Program that cover prescription medication to provide the same coverage for contraception.

**EMERGENCY CONTRACEPTION**
A federal regulation allows adults access to emergency contraception without a prescription.

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Title X of the Public Health Service Act grants federal funds to family-planning clinics that provide comprehensive reproductive-health services to low-income women, uninsured women, and women who cannot qualify for Medicaid.

**PROTECTION AGAINST CLINIC VIOLENCE**
Federal law protects women seeking reproductive-health care and medical personnel from blockades and violence.

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87 percent of U.S. counties have no abortion provider.

*SOURCE: GUTTMACHER INSTITUTE*
93 percent of Alabama counties have no abortion provider
Source: Guttmacher Institute

Alabama Political Information
EXECUTIVE
Governor Robert Riley (R) is anti-choice.

LEGISLATURE
The Alabama Senate is anti-choice.
The Alabama House is anti-choice.

Alabama Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Alabama’s Who Decides? web page.

Anti-Choice Laws
ABORTION BANS
Alabama has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Alabama law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Alabama prohibits certain state employees or organizations receiving state funds from advocating for or promoting abortion services.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Alabama restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Alabama law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Alabama subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Alabama provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Alabama restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/alabama
ALASKA

Alaska Political Information
EXECUTIVE
Governor Sean Parnell (R) is anti-choice.

LEGISLATURE
The Alaska Senate is mixed-choice.
The Alaska House is anti-choice.

Alaska Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Alaska’s Who Decides? web page.

Anti-Choice Laws
ABORTION BAN
Alaska has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING
Alaska law subjects women seeking abortion services to biased-counseling requirements.

REFUSAL TO PROVIDE MEDICAL SERVICES
Alaska allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Alaska has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Alaska law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
EMERGENCY CONTRACEPTION
Alaska allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Alaska provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
Alaska’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

GRADE
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ACCESS FACT
81 percent of Alaska counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/alaska
Arizona Political Information

EXECUTIVE
Governor Jan Brewer (R) is anti-choice.

LEGISLATURE
The Arizona Senate is anti-choice. The Arizona House is anti-choice.

Arizona Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Arizona’s Who Decides? webpage.

Anti-Choice Laws

ABORTION BANS
Arizona bans a safe abortion procedure and has an unconstitutional and unenforceable near-total criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Arizona has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Arizona prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

PUBLIC FACILITIES RESTRICTION
Arizona prohibits the use of some public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Arizona has a partially unconstitutional and unenforceable law that allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Arizona law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Arizona subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Arizona law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Arizona provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Arizona provides certain low-income women increased coverage for Medicaid-funded family-planning services.

STATE CONSTITUTIONAL PROTECTION
Arizona’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Arizona restricts post-viability abortion.

73 percent of Arizona counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

GRADE
D+

ACCESS FACT

STATE AFFILIATE

NARAL PRO-CHOICE ARIZONA
Kathren Coleman
Affiliate Manager
P. O. Box 16675
Phoenix, AZ 85011
P 602.258.4091
info@ProChoiceArizona.org
www.ProChoiceArizona.org

www.ProChoiceAmerica.org/whodecides/arizona
Arkansas Political Information

EXECUTIVE
Governor Mike Beebe (D) is mixed-choice.

LEGISLATURE
The Arkansas Senate is mixed-choice.
The Arkansas House is mixed-choice.

Arkansas Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Arkansas’ Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Arkansas bans a safe abortion procedure and has an unconstitutional and unenforceable near-total criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Arkansas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

INSURANCE PROHIBITION FOR ABORTION
Arkansas restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Arkansas’ constitution includes a strongly anti-choice policy statement.

REFUSAL TO PROVIDE MEDICAL SERVICES
Arkansas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Arkansas restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Arkansas law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Arkansas subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Arkansas law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Arkansas allows some women greater access to information about emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Arkansas provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Arkansas restricts post-viability abortion.

97 percent of Arkansas counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/arkansas
41 percent of California counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

California Political Information

EXECUTIVE
Governor Arnold Schwarzenegger (R) is mixed-choice.

LEGISLATURE
The California Senate is pro-choice.
The California Assembly is pro-choice.

California Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit California’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
California allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
California has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
California prohibits certain qualified health-care professionals from providing abortion care.

www.ProChoiceAmerica.org/whodecides/california

Other Related Laws

INFORMED CONSENT
California has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
California restricts post-viability abortion.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
California law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
California allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
California has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
California guarantees that women’s birth-control prescriptions will be filled.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
California provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
California provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
California law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
California’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.
Colorado Political Information

EXECUTIVE
Governor Bill Ritter, Jr. (D) is mixed-choice.

LEGISLATURE
The Colorado Senate is pro-choice. The Colorado House is pro-choice.

Colorado Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Colorado’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Colorado has an unconstitutional and unenforceable criminal ban on abortion.

INSURANCE PROHIBITION FOR ABORTION
Colorado restricts insurance coverage of abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Colorado allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Colorado restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Colorado law restricts young women’s access to abortion services by mandating parental notice.

SPOUSAL CONSENT
Colorado has an unconstitutional and unenforceable law mandating spousal consent before a married woman may obtain abortion services.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Colorado prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Colorado allows some women greater access to information about emergency contraception (EC).

PROTECTION AGAINST CLINIC VIOLENCE
Colorado law protects women seeking reproductive-health care and medical personnel from harassment, blockades, and violence.

78 percent of Colorado counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/colorado

D+

ACCESS FACT

STATE AFFILIATE

NARAL PRO-CHOICE COLORADO
Emilie C. Ailts
Executive Director
1905 Sherman Street
Suite 800
Denver, CO 80203
P 303.394.1973
F 303.388.1692
Choice@ProChoiceColorado.org
www.ProChoiceColorado.org
www.PreventionFirstColorado.org
CONNECTICUT

GRADE

A

ACCESS FACT

25 percent of Connecticut counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE CONNECTICUT
Jillian Gilchrest Executive Director
56 Arbor Street Suite 205 Hartford, CT 06106
P 860.523.1227
F 860.523.1229
info@Pro-ChoiceCt.org
www.Pro-ChoiceCt.org

Connecticut Political Information

EXECUTIVE
Governor M. Jodi Rell (R) is pro-choice.

LEGISLATURE
The Connecticut Senate is mixed-choice.
The Connecticut House is mixed-choice.

Connecticut Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Connecticut’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Connecticut allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Connecticut subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Connecticut law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Connecticut allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Connecticut has an affirmative right to choose in its state law.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Connecticut provides low-income women access to abortion.

PROTECTION AGAINST CLINIC VIOLENCE
Connecticut law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Connecticut's constitution provides greater protection for a woman's right to choose than the federal Constitution.

Other Related Laws

INFORMED CONSENT
Connecticut has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
Connecticut restricts post-viability abortion.

YOUNG WOMEN’S ACCESS TO ABORTION
Connecticut requires young women to receive counseling prior to receiving an abortion.

www.ProChoiceAmerica.org/whodecides/connecticut
DELAWARE

Delaware Political Information

EXECUTIVE
Governor Jack Markell (D) is mixed-choice.

LEGISLATURE
The Delaware Senate is pro-choice.
The Delaware House is mixed-choice.

Delaware Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Delaware’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Delaware has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Delaware has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Delaware allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Delaware restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Delaware law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Delaware prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Delaware law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Delaware provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Delaware has an unconstitutional and unenforceable law that restricts post-viability abortion.

33 percent of Delaware counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/delaware

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ACCESS FACT

DELAWARE C+
GRADE
ACCESS FACT
33 percent of Delaware counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
The number of abortion providers in the District of Columbia fell 17 percent from 1996 to 2000.

Source: Guttmacher Institute

District of Columbia
Political Information

EXECUTIVE
Mayor Adrian Fenty's (D) position on choice is unknown.

LEGISLATURE
The District of Columbia Council is pro-choice.

District of Columbia Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit the District of Columbia’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
The District of Columbia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
The District of Columbia restricts low-income women’s access to abortion.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
The District of Columbia prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
The District of Columbia allows some women greater access to emergency contraception (EC).

PROTECTION AGAINST CLINIC VIOLENCE
The District of Columbia protects women seeking reproductive-health care and medical personnel from blockades and violence.
Florida Political Information

**EXECUTIVE**
Governor Charlie Crist (R) is anti-choice.

**LEGISLATURE**
The Florida Senate is mixed-choice.
The Florida House is anti-choice.

Florida Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Florida’s Who Decides? web page.

Anti-Choice Laws

**ABORTION BANS**
Florida has unconstitutional and unenforceable criminal bans on abortion.

**BIASED COUNSELING**
Florida law subjects women seeking abortion services to biased-counseling requirements.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Florida allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
Florida restricts low-income women’s access to abortion.

Pro-Choice Laws

**STATE CONSTITUTIONAL PROTECTION**
Florida’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Florida provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

**POST-VIABILITY ABORTION RESTRICTION**
Florida restricts post-viability abortion.

69 percent of Florida counties have no abortion provider

Source: Guttmacher Institute

www.ProChoiceAmerica.org/whodecides/florida
Georgia Political Information

EXECUTIVE
Governor Sonny Perdue (R) is anti-choice.

LEGISLATURE
The Georgia Senate is mixed-choice. The Georgia House is anti-choice.

Georgia Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Georgia’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Georgia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Georgia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Georgia restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Georgia restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Georgia subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Georgia law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Georgia restricts post-viability abortion.

92 percent of Georgia counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
HAWAII

Hawaii Political Information

EXECUTIVE
Governor Linda Lingle (R) is mixed-choice.

LEGISLATURE
The Hawaii Senate is pro-choice.
The Hawaii House is pro-choice.

Hawaii Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Hawaii’s Who Decides? web page.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Hawaii law requires health-insurance plans to provide coverage for prescription contraception.

EMERGENCY CONTRACEPTION
Hawaii allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Hawaii has an affirmative right to choose in its state law.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Hawaii provides low-income women access to abortion.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Hawaii allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Hawaii prohibits certain qualified health-care professionals from providing abortion care.

www.ProChoiceAmerica.org/whodecides/hawaii

ProChoiceAmerica.org

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ACCESS FACT

20 percent of Hawaii counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
Idaho Political Information

EXECUTIVE
Governor Clement Leroy “Butch” Otter (R) is anti-choice.

LEGISLATURE
The Idaho Senate is anti-choice.
The Idaho House is anti-choice.

Idaho Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Idaho’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Idaho has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Idaho law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

INSURANCE PROHIBITION FOR ABORTION
Idaho restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Idaho law includes a strongly anti-choice policy statement.

REFUSAL TO PROVIDE MEDICAL SERVICES
Idaho allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Idaho restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Idaho restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Idaho prohibits certain qualified healthcare professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Idaho has an unconstitutional and unenforceable law restricting post-viability abortion.

www.ProChoiceAmerica.org/whodecides/idaho

93 percent of Idaho counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
Illinois Political Information

EXECUTIVE
Governor Pat Quinn (D) is pro-choice.

LEGISLATURE
The Illinois Senate is mixed-choice. The Illinois House is mixed-choice.

Illinois Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Illinois’ Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Illinois has an unconstitutional and unenforceable criminal ban on abortion.

COUNSELING BAN/GAG RULE
Illinois prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Illinois restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Illinois law includes a strongly anti-choice policy statement.

REFUSAL TO PROVIDE MEDICAL SERVICES
Illinois allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Illinois law restricts young women’s access to abortion services by mandating parental notice.

SPOUSAL CONSENT
Illinois has an unconstitutional and unenforceable law mandating spousal consent before a married woman may obtain abortion care.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Illinois subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Illinois law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Illinois allows some women greater access to emergency contraception (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
Illinois guarantees that women’s birth-control prescriptions will be filled.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Illinois provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Illinois provides certain low-income women increased coverage for Medicaid-funded family-planning services.

92 percent of Illinois counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

STATE CONSTITUTIONAL PROTECTION
Illinois’ constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Illinois restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/illinois

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ACCESS FACT

www.ProChoiceAmerica.org
Executive
Governor Mitch Daniels (R) is anti-choice.

Legislature
The Indiana Senate is anti-choice. The Indiana House is mixed-choice.

Indiana Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Indiana’s Who Decides? web page.

Anti-Choice Laws

Abortion Ban
Indiana has an unconstitutional and unenforceable criminal ban on abortion.

Biased Counseling & Mandatory Delay
Indiana law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

Counseling Ban/Gag Rule
Indiana prohibits certain state employees or organizations receiving state funds from advocating for or promoting abortion services.

Refusal to Provide Medical Services
Indiana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

Restrictions on Low-Income Women’s Access to Abortion
Indiana restricts low-income women’s access to abortion.

Restrictions on Young Women’s Access to Abortion
Indiana law restricts young women’s access to abortion services by mandating parental consent.

Targeted Regulation of Abortion Providers (TRAP)
Indiana subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

State Constitutional Protection
Indiana’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

Post-Viability Abortion Restriction
Indiana restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/indiana
IOWA

Iowa Political Information

EXECUTIVE
Governor Chet Culver (D) is pro-choice.

LEGISLATURE
The Iowa Senate is pro-choice. The Iowa House is mixed-choice.

Iowa Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Iowa’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Iowa has an unconstitutional and unenforceable criminal ban on abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Iowa allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Iowa restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Iowa law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Iowa prohibits certain qualified healthcare professionals from providing abortion care.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Iowa law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Iowa provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Iowa restricts post-viability abortion.

93 percent of Iowa counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/iowa
## Kansas

### Kansas Political Information

**EXECUTIVE**

Governor Mark Parkinson (D) is pro-choice.

**LEGISLATURE**

- The Kansas Senate is mixed-choice.
- The Kansas House is anti-choice.

### Kansas Laws in Brief

*This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Kansas’ Who Decides? web page.*

#### Anti-Choice Laws

- **BIASED COUNSELING & MANDATORY DELAY**
  - Kansas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

- **COUNSELING BAN/GAG RULE**
  - Kansas prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

- **PUBLIC FACILITIES RESTRICTION**
  - Kansas prohibits the use of some public facilities for abortion services.

- **REFUSAL TO PROVIDE MEDICAL SERVICES**
  - Kansas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

- **RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
  - Kansas restricts low-income women’s access to abortion.

- **RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
  - Kansas law restricts young women’s access to abortion services by mandating parental notice.

#### Pro-Choice Laws

- **PROTECTION AGAINST CLINIC VIOLENCE**
  - Kansas law protects women seeking reproductive-health care and medical personnel from blockades and violence.

#### Other Related Laws

- **POST-VIABILITY ABORTION RESTRICTION**
  - Kansas restricts post-viability abortion.

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**Access Fact**

96 percent of Kansas counties have no abortion provider.

SOURCE: GUTTMACHER INSTITUTE

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www.ProChoiceAmerica.org/whodecides/kansas

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**Grade**

D–
Kentucky Political Information

EXECUTIVE
Governor Steve Beshear (D) is mixed-choice.

LEGISLATURE
The Kentucky Senate is anti-choice. The Kentucky House is anti-choice.

Kentucky Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Kentucky’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Kentucky has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Kentucky has a partially unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Kentucky prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Kentucky restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Kentucky law includes a strongly anti-choice policy statement.

PUBLIC FACILITIES RESTRICTION
Kentucky prohibits the use of all public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Kentucky allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Kentucky restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Kentucky law restricts young women’s access to abortion services by mandating parental consent.

SPousal NOTICE
Kentucky has an unconstitutional and unenforceable law mandating spousal notice before a married woman may obtain abortion care.

Targeted Regulation of Abortion Providers (TRAP)
Kentucky subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Kentucky restricts post-viability abortion.

98 percent of Kentucky counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/kentucky
LOUISIANA

Louisiana Political Information
EXECUTIVE
Governor Bobby Jindal (R) is anti-choice.

LEGISLATURE
The Louisiana Senate is anti-choice. The Louisiana House is anti-choice.

Louisiana Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Louisiana’s Who Decides? web page.

Anti-Choice Laws
ABORTION BANS
Louisiana bans a safe abortion procedure, has an unconstitutional and unenforceable near-total criminal ban on abortion, and has a near-total criminal ban on abortion that would take effect if Roe v. Wade is overturned.

BIASED COUNSELING & MANDATORY DELAY
Louisiana law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Louisiana prohibits certain state employees or organizations receiving state funds from referring for abortion services.

OTHER ANTI-CHOICE LAW
Louisiana law includes a strongly anti-choice policy statement.

PUBLIC FACILITIES RESTRICTION
Louisiana prohibits the use of all public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Louisiana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Louisiana restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Louisiana law restricts young women’s access to abortion services by mandating parental consent.

SPOUSAL CONSENT
Louisiana has an unconstitutional and unenforceable law mandating spousal consent before a married woman may obtain abortion care.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Louisiana subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Louisiana provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Louisiana restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/louisiana

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ACCESS FACT

92 percent of Louisiana counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
MAINE

Maine Political Information

EXECUTIVE
Governor John Baldacci (D) is pro-choice.

LEGISLATURE
The Maine Senate is pro-choice. The Maine House is pro-choice.

Maine Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Maine's Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Maine allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Maine restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Maine restricts young women’s access to abortion by requiring parental consent in some cases and mandating counseling before a young woman may obtain abortion care.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Maine prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Maine law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACTION
Maine allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Maine has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
Maine guarantees that women’s birth-control prescriptions will be filled.

PROTECTION AGAINST CLINIC VIOLENCE
Maine law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

INFORMED CONSENT
Maine has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
Maine restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/maine

63 percent of Maine counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

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ACCESS FACT

www.ProChoiceAmerica.org/whodecides/maine
MARYLAND

MARYLAND POLITICAL INFORMATION

EXECUTIVE
Governor Martin O’Malley (D) is pro-choice.

LEGISLATURE
The Maryland Senate is mixed-choice.
The Maryland House of Delegates is pro-choice.

MARYLAND LAWS IN BRIEF

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Maryland’s Who Decides? web page.

ANTI-CHOICE LAWS

REFUSAL TO PROVIDE MEDICAL SERVICES
Maryland allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Maryland law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Maryland prohibits certain qualified health-care professionals from providing abortion care.

PRO-CHOICE LAWS

CONTRACEPTIVE EQUITY
Maryland law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Maryland allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Maryland has an affirmative right to choose in its state law.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Maryland provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Maryland provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Maryland law protects women seeking reproductive-health care and medical personnel from blockades and violence.

www.ProChoiceAmerica.org/whodecides/maryland

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ACCESS FACT

58 percent of Maryland counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE MARYLAND
Jennifer Blasdell
Executive Director
8121 Georgia Avenue
Suite 501
Silver Spring, MD 20910
P 301.565.4154
F 301.588.5790
info@ProChoiceMaryland.org
www.ProChoiceMaryland.org
Massachusetts

Massachusetts Political Information

EXECUTIVE
Governor Deval Patrick (D) is pro-choice.

LEGISLATURE
The Massachusetts Senate is pro-choice. The Massachusetts House is pro-choice.

Massachusetts Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Massachusetts’ Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Massachusetts has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Massachusetts has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

INSURANCE PROHIBITION FOR ABORTION
Massachusetts restricts insurance coverage of abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Massachusetts allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Massachusetts law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Massachusetts prohibits certain qualified health-care professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Massachusetts law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Massachusetts allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Massachusetts provides low-income women access to abortion.

PROTECTION AGAINST CLINIC VIOLENCE
Massachusetts law protects women seeking reproductive-health care and medical personnel from harassment, blockades, and violence.

STATE CONSTITUTIONAL PROTECTION
Massachusetts’ constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Massachusetts restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/massachusetts

ProChoiceAmerica.org

2010 Who Decides? | 53
MICHIGAN

Michigan Political Information
EXECUTIVE
Governor Jennifer Granholm (D) is pro-choice.

LEGISLATURE
The Michigan Senate is anti-choice.
The Michigan House is anti-choice.

Michigan Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Michigan’s Who Decides? web page.

Anti-Choice Laws
ABORTION BANS
Michigan has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Michigan has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Michigan prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Michigan allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Michigan restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Michigan law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Michigan subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
CONTRACEPTIVE EQUITY
Michigan law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Michigan provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Michigan law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Michigan restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/michigan

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ACCESS FACT
83 percent of Michigan counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
Minnesota Political Information

EXECUTIVE
Governor Tim Pawlenty (R) is anti-choice.

LEGISLATURE
The Minnesota Senate is pro-choice. The Minnesota House is mixed-choice.

Minnesota Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Minnesota’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Minnesota law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Minnesota prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Minnesota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Minnesota law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Minnesota subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Minnesota allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Minnesota provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Minnesota provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Minnesota law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Minnesota’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Minnesota has an unconstitutional and unenforceable law restricting post-viability abortion.

95 percent of Minnesota counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

NARAL PRO-CHOICE MINNESOTA
Linnea House
Executive Director
2300 Myrtle Avenue
Suite 120
St. Paul, MN 55114
P 651.602.7655
F 651.602.7658
info@ProChoiceMinnesota.org
www.ProChoiceMinnesota.org

www.ProChoiceAmerica.org/whodecides/minnesota
# MISSISSIPPI

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**ACCESS FACT**

99 percent of Mississippi counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

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<table>
<thead>
<tr>
<th>Mississippi Political Information</th>
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<tbody>
<tr>
<td><strong>EXECUTIVE</strong> Governor Haley Barbour (R) is anti-choice.</td>
</tr>
<tr>
<td><strong>LEGISLATURE</strong> The Mississippi Senate is anti-choice. The Mississippi House is anti-choice.</td>
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## Mississippi Laws in Brief

*This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Mississippi’s Who Decides? web page.*

### Anti-Choice Laws

**ABORTION BANS**

Mississippi has unconstitutional and unenforceable criminal bans on abortion, and has a near-total criminal ban on abortion that would take effect if *Roe v. Wade* is overturned.

**BIASED COUNSELING & MANDATORY DELAY**

Mississippi law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**

Mississippi prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

**INSURANCE PROHIBITION FOR ABORTION**

Mississippi restricts insurance coverage of abortion.

### Pro-Choice Laws

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**

Mississippi provides certain low-income women increased coverage for Medicaid-funded family-planning services.

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MISSOURI

Missouri Political Information

EXECUTIVE
Governor Jay Nixon (D) is mixed-choice.

LEGISLATURE
The Missouri Senate is anti-choice.
The Missouri House is anti-choice.

Missouri Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Missouri’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Missouri bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Missouri law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Missouri prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Missouri restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Missouri law includes a strongly anti-choice policy statement.

PUBLIC FACILITIES AND PUBLIC EMPLOYEES RESTRICTION
Missouri prohibits the use of all public facilities and public employees for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Missouri allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Missouri restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Missouri law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Missouri subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Missouri law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Missouri provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Missouri restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/missouri

96 percent of Missouri counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

NARAL PRO-CHOICE MISSOURI
Pamela Sumners
Executive Director
1210 South Vandeventer Avenue
St. Louis, MO 63110
P 314.531.8616
F 314.531.8615
info@ProChoiceMissouri.org
www.ProChoiceMissouri.org
Montana Political Information

EXECUTIVE
Governor Brian Schweitzer (D) is pro-choice.

LEGISLATURE
The Montana Senate is anti-choice. The Montana House is anti-choice.

Montana Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Montana’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Montana has an unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Montana allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

PROTECTION AGAINST CLinic vIOLENCE
Montana law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Montana’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Montana restricts post-viability abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Montana has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental notice.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Montana law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Montana provides low-income women access to abortion.

STATE AFFILIATE

NARAL PRO-CHOICE MONTANA
Allyson Hagen
Executive Director
P. O. Box 279
Helena, MT 59624
P 406.442.2057
F 406.442.4801
mtnaral@mt.net
www.ProChoiceMontana.org

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ACCESS FACT

91 percent of Montana counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/montana
NEBRASKA

Nebraska Political Information

EXECUTIVE
Governor Dave Heineman (R) is anti-choice.

LEGISLATURE
The Nebraska Legislature is anti-choice.

Nebraska Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Nebraska’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Nebraska has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Nebraska law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Nebraska prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Nebraska restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Nebraska law includes a strongly anti-choice policy statement.

REFUSAL TO PROVIDE MEDICAL SERVICES
Nebraska allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Nebraska restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Nebraska law restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Nebraska prohibits certain qualified health-care professionals from providing abortion care.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Nebraska restricts post-viability abortion.

GRADE
F

ACCESS FACT
97 percent of Nebraska counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/nebraska
Nevada Political Information

EXECUTIVE
Governor Jim Gibbons (R) is anti-choice.

LEGISLATURE
The Nevada Senate is mixed-choice.
The Nevada Assembly is mixed-choice.

Nevada Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Nevada’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Nevada allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Nevada restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Nevada has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental notice.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Nevada law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Nevada law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

FREEDOM OF CHOICE ACT
Nevada has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
Nevada guarantees that women’s birth-control prescriptions will be filled.

PROTECTION AGAINST CLINIC VIOLENCE
Nevada law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

INFORMED CONSENT
Nevada has an abortion-specific informed-consent law.

POST-VIABILITY ABORTION RESTRICTION
Nevada restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/nevada

ACCESS FACT
88 percent of Nevada counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

GRADE
A-
NEW HAMPSHIRE

New Hampshire Political Information

EXECUTIVE
Governor John Lynch (D) is pro-choice.

LEGISLATURE
The New Hampshire Senate is pro-choice.
The New Hampshire House is pro-choice.

New Hampshire Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit New Hampshire’s Who Decides? web page.

Anti-Choice Laws
RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
New Hampshire restricts low-income women’s access to abortion.

Pro-Choice Laws
CONTRACEPTIVE EQUITY
New Hampshire law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
New Hampshire allows some women greater access to emergency contraception (EC).

50 percent of New Hampshire counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

NARAL PRO-CHOICE NEW HAMPSHIRE
Pilar Olivo
Interim Executive Director
18 Low Avenue
Concord, NH 03301
P 603.228.1224
F 603.226.4505
info@ProChoiceNH.org
www.ProChoiceNewHampshire.org

www.ProChoiceAmerica.org/whodecides/newhampshire

ProChoiceAmerica.org

2010 Who Decides? 61
NEW JERSEY

New Jersey Political Information

EXECUTIVE
Governor Chris Christie (R) is anti-choice.

LEGISLATURE
The New Jersey Senate is pro-choice. The New Jersey General Assembly is pro-choice.

New Jersey Laws in Brief

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
New Jersey law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
New Jersey law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
New Jersey law allows some women greater access to emergency contraception (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
New Jersey law guarantees that women's birth-control prescriptions will be filled.

LOW-INCOME WOMEN'S ACCESS TO ABORTION
New Jersey provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
New Jersey's constitution provides greater protection for a woman's right to choose than the federal Constitution.

www.ProChoiceAmerica.org/whodecides/newjersey

GRADE

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ACCESS FACT

19 percent of New Jersey counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
New Mexico Political Information

**EXECUTIVE**
Governor Bill Richardson (D) is pro-choice.

**LEGISLATURE**
The New Mexico Senate is mixed-choice.
The New Mexico House is mixed-choice.

New Mexico Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit New Mexico’s Who Decides? web page.

Anti-Choice Laws

**ABORTION BAN**
New Mexico has an unconstitutional and unenforceable criminal ban on abortion.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
New Mexico allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
New Mexico has an unconstitutional and unenforceable law that restricts young women’s access to abortion services by mandating parental consent.

Pro-Choice Laws

**CONTRACEPTIVE EQUITY**
New Mexico law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

**EMERGENCY CONTRACEPTION**
New Mexico allows some women greater access to emergency contraception (EC).

**LOW-INCOME WOMEN’S ACCESS TO ABORTION**
New Mexico provides low-income women access to abortion.

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
New Mexico provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**STATE CONSTITUTIONAL PROTECTION**
New Mexico’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

**POST-VIABILITY ABORTION RESTRICTION**
New Mexico restricts post-viability abortion.

88 percent of New Mexico counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/newmexico
New York Political Information

EXECUTIVE
Governor David Paterson (D) is pro-choice.

LEGISLATURE
The New York Senate is mixed-choice. The New York Assembly is pro-choice.

New York Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit New York’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
New York allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
New York prohibits certain qualified health-care professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
New York law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
New York allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
New York provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
New York provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
New York law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
New York restricts post-viability abortion.

40 percent of New York counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

NARAL PRO-CHOICE NEW YORK
Kelli Conlin
President
470 Park Avenue South
7th Floor
New York, NY 10016
P 212.343.0114
F 212.343.0119
info@ProChoiceNY.org
www.ProChoiceNY.org

www.ProChoiceAmerica.org/whodecides/newyork
NORTH CAROLINA

North Carolina Political Information

EXECUTIVE
Governor Beverly Perdue (D) is pro-choice.

LEGISLATURE
The North Carolina Senate is mixed-choice.
The North Carolina House is mixed-choice.

North Carolina Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit North Carolina’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
North Carolina allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
North Carolina restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
North Carolina law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
North Carolina subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
North Carolina law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
North Carolina provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
North Carolina law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
North Carolina restricts post-viability abortion.

83 percent of North Carolina counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/northcarolina

ProChoiceAmerica.org
NORTH DAKOTA

North Dakota Political Information

EXECUTIVE
Governor John Hoeven (R) is anti-choice.

LEGISLATURE
The North Dakota Senate is anti-choice.
The North Dakota House is anti-choice.

North Dakota Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit North Dakota’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
North Dakota has an unconstitutional and unenforceable criminal ban on abortion, and has a near-total criminal ban on abortion that would take effect if Roe v. Wade is overturned.

BIASED COUNSELING & MANDATORY DELAY
North Dakota law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
North Dakota has a partially unconstitutional and unenforceable law that prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
North Dakota restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
North Dakota law includes a strongly anti-choice policy statement.

PUBLIC FACILITIES RESTRICTION
North Dakota prohibits the use of some public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
North Dakota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
North Dakota restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
North Dakota law restricts young women’s access to abortion services by mandating parental consent.

SPOUSAL CONSENT
North Dakota has an unconstitutional and unenforceable law mandating spousal consent before a married woman may obtain abortion services.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
North Dakota prohibits certain qualified health-care professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
North Dakota restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/northdakota

GRADE
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ACCESS FACT

98 percent of North Dakota counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

SOURCE: NARAL PRO-CHOICE AMERICA FOUNDATION

66 | NARAL PRO-CHOICE AMERICA FOUNDATION ProChoiceAmerica.org
90 percent of Ohio counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

Ohio Political Information

EXECUTIVE
Governor Ted Strickland (D) is mixed-choice.

LEGISLATURE
The Ohio Senate is anti-choice.
The Ohio House is mixed-choice.

Ohio Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Ohio’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Ohio bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Ohio law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Ohio prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Ohio restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Ohio has an unconstitutional and unenforceable law that restricts access to mifepristone.

REFUSAL TO PROVIDE MEDICAL SERVICES
Ohio allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Ohio restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Ohio law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Ohio subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Ohio has an unconstitutional and unenforceable ban on post-viability abortion.

www.ProChoiceAmerica.org/whodecides/ohio

ProChoiceAmerica.org

2010 Who Decides? | 67
Oklahoma Political Information

EXECUTIVE
Governor Brad Henry (D) is mixed-choice.

LEGISLATURE
The Oklahoma Senate is anti-choice.
The Oklahoma House is anti-choice.

Oklahoma Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Oklahoma’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Oklahoma has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Oklahoma law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Oklahoma prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Oklahoma restricts insurance coverage of abortion.

PUBLIC FACILITIES AND EMPLOYEES RESTRICTION
Oklahoma prohibits the use of all public facilities and public employees for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Oklahoma allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Oklahoma restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Oklahoma law restricts young women’s access to abortion services by mandating parental notice and consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Oklahoma prohibits certain qualified health-care professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Oklahoma allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Oklahoma provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Oklahoma restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/oklahoma

ACCESS FACT

96 percent of Oklahoma counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE
Oregon Political Information

EXECUTIVE
Governor Ted Kulongoski (D) is pro-choice.

LEGISLATURE
The Oregon Senate is pro-choice. The Oregon House is pro-choice.

Oregon Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Oregon’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Oregon allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Oregon law requires health-insurance plans that cover prescription medication to provide equitable coverage for contraception.

EMERGENCY CONTRACEPTION
Oregon allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Oregon provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Oregon provides certain low-income women increased coverage for Medicaid-funded family-planning services.

OTHER PRO-CHOICE LAW
Oregon law contains a policy position in support of the right to birth control.

PROTECTION AGAINST CLINIC VIOLENCE
Oregon law protects women seeking reproductive-health care and medical personnel from blockades and violence.

STATE CONSTITUTIONAL PROTECTION
Oregon’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

78 percent of Oregon counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/oregon
PENNSYLVANIA

Pennsylvania Political Information

EXECUTIVE
Governor Edward Rendell (D) is pro-choice.

LEGISLATURE
The Pennsylvania Senate is mixed-choice.
The Pennsylvania House is mixed-choice.

Pennsylvania Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Pennsylvania’s Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Pennsylvania law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Pennsylvania prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Pennsylvania restricts insurance coverage of abortion.

OTHER ANTI-CHOICE LAW
Pennsylvania law includes a strongly anti-choice policy statement.

PUBLIC FACILITIES RESTRICTION
Pennsylvania prohibits the use of some public facilities for abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Pennsylvania allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Pennsylvania restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Pennsylvania law restricts young women’s access to abortion services by mandating parental consent.

SPOUSAL NOTICE
Pennsylvania has an unconstitutional and unenforceable law mandating spousal notice before a married woman may obtain abortion services.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Pennsylvania subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Pennsylvania provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Pennsylvania restricts post-violability abortion.

www.ProChoiceAmerica.org/whodecides/pennsylvania

GRADE
F

ACCESS FACT

78 percent of Pennsylvania counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE
RHODE ISLAND

Rhode Island Political Information

EXECUTIVE
Governor Donald Carcieri (R) is anti-choice.

LEGISLATURE
The Rhode Island Senate is anti-choice.
The Rhode Island House is mixed-choice.

Rhode Island Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Rhode Island’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Rhode Island has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING
Rhode Island law subjects women seeking abortion services to biased-counseling requirements.

INSURANCE PROHIBITION FOR ABORTION
Rhode Island restricts insurance coverage of abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Rhode Island allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Rhode Island restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Rhode Island law restricts young women’s access to abortion services by mandating parental consent.

SPOUSAL NOTICE
Rhode Island has an unconstitutional and unenforceable law mandating spousal notice before a married woman may obtain abortion services.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Rhode Island subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Rhode Island law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Rhode Island provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Rhode Island restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/rhodeisland

ProChoiceAmerica.org

GRADE

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ACCESS FACT

80 percent of Rhode Island counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE
**South Carolina**

**South Carolina Political Information**

**EXECUTIVE**
Governor Mark Sanford (R) is anti-choice.

**LEGISLATURE**
The South Carolina Senate is mixed-choice.
The South Carolina House is mixed-choice.

**South Carolina Laws in Brief**
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit South Carolina’s Who Decides? web page.

**Anti-Choice Laws**

**ABORTION BAN**
South Carolina has an unconstitutional and unenforceable criminal ban on abortion.

**BIASED COUNSELING & MANDATORY DELAY**
South Carolina law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

**COUNSELING BAN/GAG RULE**
South Carolina prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

**INSURANCE PROHIBITION FOR ABORTION**
South Carolina restricts insurance coverage of abortion.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
South Carolina allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION**
South Carolina restricts low-income women’s access to abortion.

**RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION**
South Carolina law restricts young women’s access to abortion services by mandating parental consent.

**SPOUSAL CONSENT**
South Carolina has an unconstitutional and unenforceable law mandating spousal consent before a married woman may obtain abortion care.

**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
South Carolina subjects abortion providers to burdensome restrictions not applied to other medical professionals.

**Pro-Choice Laws**

**EMERGENCY CONTRACEPTION**
South Carolina allows some women greater access to emergency contraception (EC).

**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
South Carolina provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Other Related Laws**

**POST-VIABILITY ABORTION RESTRICTION**
South Carolina restricts post-viability abortion.

**GRADE**

**F**

**ACCESS FACT**

91 percent of South Carolina counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

**SOURCE:** www.ProChoiceAmerica.org/whodecides/southcarolina
South Dakota Political Information

EXECUTIVE
Governor M. Michael Rounds (R) is anti-choice.

LEGISLATURE
The South Dakota Senate is anti-choice. The South Dakota House is anti-choice.

South Dakota Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit South Dakota’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
South Dakota has an unconstitutional and unenforceable criminal ban on abortion, and has a near-total criminal ban on abortion that would take effect if Roe v. Wade is overturned.

BIASED COUNSELING & MANDATORY DELAY
South Dakota has a partially unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
South Dakota allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

REstrictions on Low-INcome Women’s Access to abortion
South Dakota restricts low-income women’s access to abortion.

Restrictions on Young Women’s Access to abortion
South Dakota law restricts young women’s access to abortion services by mandating parental notice.

Targeted Regulation of Abortion Providers (TRAP)
South Dakota subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Other Related Laws

Post-Viability Abortion Restriction
South Dakota restricts post-viability abortion.

GRADE

F

Access Fact

98 percent of South Dakota counties have no abortion provider
Source: Guttmacher Institute

State Affiliate

NARAL PRO-CHOICE SOUTH DAKOTA
Casey Murschel
Executive Director
401 East 8th Street
Suite 330G
Sioux Falls, SD 57103
P 605.334.5065
Info@ProChoiceSD.org
www.ProChoiceSD.org

www.ProChoiceAmerica.org/whodecides/southdakota
TENNESSEE

Tennessee Political Information

EXECUTIVE
Governor Phil Bredesen (D) is mixed-choice.

LEGISLATURE
The Tennessee Senate is anti-choice. The Tennessee House is anti-choice.

Tennessee Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Tennessee’s Who Decides? web page.

Anti-Choice Laws

ABORTION BAN
Tennessee has an unconstitutional and unenforceable criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Tennessee has an unconstitutional and unenforceable law that subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
Tennessee allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Tennessee restricts low-income women’s access to abortion.

Pro-Choice Laws

STATE CONSTITUTIONAL PROTECTION
Tennessee’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Tennessee restricts post-viability abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Tennessee law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Tennessee prohibits certain qualified health-care professionals from providing abortion care, and has an unconstitutional and unenforceable law that subjects abortion providers to burdensome restrictions not applied to other medical professionals.

www.ProChoiceAmerica.org/whodecides/tennessee
TExAS

Texas Political Information

EXECUTIVE
Governor Rick Perry (R) is anti-choice.

LEGISLATURE
The Texas Senate is anti-choice.
The Texas House is anti-choice.

Texas Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Texas’ Who Decides? web page.

Anti-Choice Laws

BIASED COUNSELING & MANDATORY DELAY
Texas law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Texas prohibits certain state employees and organizations receiving state funds from counseling or referring for abortion services.

PUBLIC FACILITIES AND EMPLOYEES RESTRICTION
Texas prohibits the use of public funds for the direct or indirect costs of most abortion services.

REFUSAL TO PROVIDE MEDICAL SERVICES
Texas allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Texas restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Texas law restricts young women’s access to abortion services by mandating parental notice and consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Texas subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Texas provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Texas restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/texas

GRADE

F

ACCESS FACT

93 percent of Texas counties have no abortion provider

SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE

NARAL PRO-CHOICE TEXAS
Sara Cleveland
Executive Director
P.O. Box 684602
Austin, TX 78768
P 512.462.1661
F 512.462.2007
info@ProChoiceTexas.org
www.ProChoiceTexas.org
Utah Political Information

EXECUTIVE
Governor Gary Herbert (R) is anti-choice.

LEGISLATURE
The Utah Senate is anti-choice.
The Utah House is anti-choice.

Utah Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Utah’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Utah bans a safe abortion procedure, and has an unconstitutional and unenforceable near-total criminal ban on abortion.

BIASED COUNSELING & MANDATORY DELAY
Utah law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

OTHER ANTI-CHOICE LAW
Utah law includes a strongly anti-choice policy statement.

REFUSAL TO PROVIDE MEDICAL SERVICES
Utah allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Utah restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Utah law restricts young women’s access to abortion services by mandating parental notice and consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Utah subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

EMERGENCY CONTRACEPTION
Utah allows some women greater access to emergency contraception (EC).

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Utah has an unconstitutional and unenforceable law restricting post-viability abortion.

93 percent of Utah counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/utah
VERMONT

Vermont Political Information
EXECUTIVE
Governor Jim Douglas (R) is mixed-choice.

LEGISLATURE
The Vermont Senate is pro-choice. The Vermont House is pro-choice.

Vermont Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Vermont’s Who Decides? web page.

Anti-Choice Laws
ABORTION BAN
Vermont has an unconstitutional and unenforceable criminal ban on abortion.

Pro-Choice Laws
CONTRACEPTIVE EQUITY
Vermont law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Vermont allows some women greater access to emergency contraception (EC).

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Vermont provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
Vermont’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

www.ProChoiceAmerica.org/whodecides/vermont

43 percent of Vermont counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

GRADE
A−

ACCESS FACT
VIRGINIA

GRADE
F

ACCESS FACT
86 percent of Virginia counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
NARAL PRO-CHOICE VIRGINIA
Tarina Keene
Executive Director
P. O. Box 1204
Alexandria, VA 22313
P 757.287.3356
info@NaralVa.org

Virginia Political Information
EXECUTIVE
Governor Bob McDonnell (R) is anti-choice.

LEGISLATURE
The Virginia Senate is mixed-choice.
The Virginia House of Delegates is anti-choice.

Virginia Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Virginia’s Who Decides? webpage.

Anti-Choice Laws
ABORTION BAN
Virginia bans a safe abortion procedure.

BIASED COUNSELING & MANDATORY DELAY
Virginia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Virginia prohibits certain state employees or organizations receiving state funds from referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Virginia restricts insurance coverage of abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Virginia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Virginia restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Virginia law restricts young women’s access to abortion services by mandating parental notice and consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Virginia law subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws
LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Virginia provides certain low-income women increased coverage for Medicaid-funded family-planning services.

Other Related Laws
POST-VIABILITY ABORTION RESTRICTION
Virginia restricts post-viability abortion.

www.ProChoiceAmerica.org/whodecides/virginia
WASHINGTON

Washington Political Information

EXECUTIVE
Governor Christine Gregoire (D) is pro-choice.

LEGISLATURE
The Washington Senate is pro-choice. The Washington House is pro-choice.

Washington Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Washington’s Who Decides? web page.

Anti-Choice Laws

REFUSAL TO PROVIDE MEDICAL SERVICES
Washington allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Washington prohibits certain qualified health-care professionals from providing abortion care.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Washington law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Washington allows some women greater access to emergency contraception (EC).

FREEDOM OF CHOICE ACT
Washington has an affirmative right to choose in its state law.

GUARANTEED ACCESS TO PRESCRIPTIONS
Washington has a rule that requires pharmacists to dispense women’s birth control.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
Washington provides low-income women access to abortion.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Washington provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Washington law protects women seeking reproductive-health care and medical personnel from blockades and violence.

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Washington restricts post-viability abortion.

GRADE
A +

ACCESS FACT
67 percent of Washington counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

STATE AFFILIATE
NARAL PRO-CHOICE WASHINGTON
Lauren Simonds
Executive Director
811 First Avenue
Suite 456
Seattle, WA 98104
P 206.624.1990
F 206.624.4505
info@ProChoiceWashington.org
www.ProChoiceWashington.org

www.ProChoiceAmerica.org/whodecides/washington

ProChoiceAmerica.org
West Virginia

West Virginia Political Information

EXECUTIVE
Governor Joe Manchin (D) is anti-choice.

LEGISLATURE
The West Virginia Senate is mixed-choice.
The West Virginia House of Delegates is mixed-choice.

West Virginia Laws in Brief
This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit West Virginia’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
West Virginia has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
West Virginia law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

REFUSAL TO PROVIDE MEDICAL SERVICES
West Virginia allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
West Virginia law restricts young women’s access to abortion services by mandating parental notice.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
West Virginia law requires health-insurance plans that cover prescription medication to provide the same coverage for contraception.

LOW-INCOME WOMEN’S ACCESS TO ABORTION
West Virginia provides low-income women access to abortion.

STATE CONSTITUTIONAL PROTECTION
West Virginia’s constitution provides greater protection for a woman’s right to choose than the federal Constitution.

GRADE
B

ACCESS FACT
96 percent of West Virginia counties have no abortion provider
SOURCE: GUTTMACHER INSTITUTE

www.ProChoiceAmerica.org/whodecides/westvirginia
93 percent of Wisconsin counties have no abortion provider.

SOURCE: GUTTMACHER INSTITUTE

Wisconsin Political Information

EXECUTIVE
Governor Jim Doyle (D) is pro-choice.

LEGISLATURE
The Wisconsin Senate is pro-choice.
The Wisconsin Assembly is mixed-choice.

Wisconsin Laws in Brief

This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Wisconsin’s Who Decides? web page.

Anti-Choice Laws

ABORTION BANS
Wisconsin has unconstitutional and unenforceable criminal bans on abortion.

BIASED COUNSELING & MANDATORY DELAY
Wisconsin law subjects women seeking abortion services to biased-counseling requirements and mandatory delays.

COUNSELING BAN/GAG RULE
Wisconsin prohibits certain state employees or organizations receiving state funds from counseling or referring women for abortion services.

INSURANCE PROHIBITION FOR ABORTION
Wisconsin restricts insurance coverage of abortion.

REFUSAL TO PROVIDE MEDICAL SERVICES
Wisconsin allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

RESTRICTIONS ON LOW-INCOME WOMEN’S ACCESS TO ABORTION
Wisconsin restricts low-income women’s access to abortion.

RESTRICTIONS ON YOUNG WOMEN’S ACCESS TO ABORTION
Wisconsin law restricts young women’s access to abortion services by mandating parental consent.

TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)
Wisconsin subjects abortion providers to burdensome restrictions not applied to other medical professionals.

Pro-Choice Laws

CONTRACEPTIVE EQUITY
Wisconsin law requires employers that provide insurance coverage for prescription medication to provide the same coverage for contraception.

EMERGENCY CONTRACEPTION
Wisconsin allows some women greater access to emergency contraceptive (EC).

GUARANTEED ACCESS TO PRESCRIPTIONS
Wisconsin guarantees that women’s birth-control prescriptions will be filled.

LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING
Wisconsin provides certain low-income women increased coverage for Medicaid-funded family-planning services.

PROTECTION AGAINST CLINIC VIOLENCE
Wisconsin law protects women seeking reproductive-health care and medical personnel from blockades and violence.

www.ProChoiceAmerica.org/whodecides/wisconsin

Other Related Laws

POST-VIABILITY ABORTION RESTRICTION
Wisconsin restricts post-viability abortion.
**Wyoming Political Information**

**EXECUTIVE**
Governor Dave Freudenthal (D) is mixed-choice.

**LEGISLATURE**
The Wyoming Senate is anti-choice.
The Wyoming House is mixed-choice.

**Wyoming Laws in Brief**
*This information is current as of November 30, 2009. For up-to-date information and detailed summaries, please visit Wyoming’s Who Decides? web page.*

**Anti-Choice Laws**
**TARGETED REGULATION OF ABORTION PROVIDERS (TRAP)**
Wyoming prohibits certain qualified health-care professionals from providing abortion care.

**REFUSAL TO PROVIDE MEDICAL SERVICES**
Wyoming allows certain individuals or entities to refuse to provide women specific reproductive-health services, information, or referrals.

**Pro-Choice Laws**
**LOW-INCOME WOMEN’S ACCESS TO FAMILY PLANNING**
Wyoming provides certain low-income women increased coverage for Medicaid-funded family-planning services.

**Other Related Laws**
**POST-VIABILITY ABORTION RESTRICTION**
Wyoming restricts post-viability abortion.

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**Grade**
D+

**Access Fact**
96 percent of Wyoming counties have no abortion provider

*Source: Guttmacher Institute*

**State Affiliate**
**NARAL PRO-CHOICE WYOMING**
Sharon Breitweiser  
Executive Director  
P.O. Box 271  
Laramie, WY 82073  
P 307.742.9189  
F 307.742.9189  
NaralProChoiceWY@netscape.net

www.ProChoiceAmerica.org/whodecides/wyoming
CONCLUSION
GENERAL METHODOLOGY

NARAL Pro-Choice America Foundation has supporting documentation for statements of fact made in Who Decides? The Status of Women’s Reproductive Rights in the United States. We do not cite all the letters, notes, emails, records of telephone interviews, and faxed information in the publication itself, but we maintain such documentation in NARAL Pro-Choice America Foundation’s offices.

ACCESS FACTS: The number of abortion providers and analysis of census data was supplied by the Guttmacher Institute (2004–2005 Guttmacher Abortion Provider Survey and U.S. Census population counts as of April 1, 2005).

STATE LEGISLATIVE INFORMATION: This report uses the term “measures enacted” to refer to statutes and resolutions adopted by the legislature. “Laws” refers to constitutional provisions, statutes, regulations, court decisions, and opinions of state attorneys general.

NARAL Pro-Choice America Foundation keeps memoranda on the criteria used for this report’s count of legislative measures. In addition to the types of laws that are highlighted in Who Decides?, the anti-choice counts include a variety of other anti-choice measures, including but not limited to providing “Choose Life” license plates, funding anti-choice “crisis pregnancy centers”, mandating unproven “abstinence-only” programs, and granting legal status to embryos and fetuses separate from pregnant women. The pro-choice counts include but are not limited to measures designed to ameliorate anti-choice laws or actions (e.g. requiring “crisis pregnancy centers” to disclose anti-choice bias); various measures designed to improve reproductive-health through research, education, or improved access; measures to support healthy childbearing; and measures to require scientific and medical accuracy in sex education. For information about bills pending in your state, please visit our Bill Tracker webpage at http://www.ProChoiceAmerica.org/choice-action-center/in_your_state/bill-tracker/index.html. For further information, please contact the Policy Department.

REPORT CARD METHODOLOGY

For 12 years, Who Decides? has used a ranking system to capture the cumulative burdens each state imposes on access to reproductive-health care. The ranking system adds points for anti-choice restrictions on abortion and other aspects of reproductive-health care, and subtracts points for pro-choice laws. The ranking system penalizes most heavily the laws imposing greater burdens on women. Likewise, its demerits fall most heavily on laws that are enforced, rather than laws that courts have declared invalid. A detailed analysis of the report card methodology appears below. The nationwide grade reflects not only state restrictions on the right to choose, but also federal anti-choice measures including the Federal Abortion Ban and the Federal Refusal Clause, signed into law by President Bush in 2003 and 2004, respectively.

Abortion Ban(s) (+ up to 90 points)
Points were added based on the point in pregnancy when the ban(s) begin and the exceptions included in the ban(s). Separate points were added for ban(s) whose effective dates would be triggered if the Supreme Court overrules Roe v. Wade.

Biased Counseling & Mandatory Delays (+ up to 25 points)
Points were added based on the length of the waiting period; whether multiple trips are required; whether a physician is required personally to provide specified information; whether the woman must receive state-prepared materials; and whether the woman must receive other information, oral or written, that contains information beyond risks, benefits, and alternatives. If a state simply has an abortion-specific informed consent law that does not require biased counseling or a mandatory delay, no points were added.

Contraceptive Equity (- up to 20 points)
Points were subtracted if a state requires health-insurance plans to cover contraceptives to the same extent that they cover other prescription medication; fewer points were subtracted if the law has an overly broad refusal clause or requires an insurer only to offer and make available such coverage but not include it in every plan.
Counseling Ban/Gag Rule (+ up to 10 points)
Points were added if the ban applies to counseling and/or referring; if the ban applies to all or some public funds or employees; and the exceptions included in the ban.

Emergency Contraception (- up to 25 points)
Points were subtracted if the state allows sexual-assault survivors greater access to emergency contraception (EC) in emergency rooms (ER) (receiving EC in the ER and/or receiving information about EC in the ER), if the state’s Medicaid program covers over-the-counter EC, and if pharmacists are allowed to provide EC to a woman without a prescription through a law specific to EC or one that permits collaborative-therapy agreements generally and includes EC. (These laws were in place before the FDA approved EC for over-the-counter sales and still provide greater access in some states, particularly to young women who are excluded from the FDA’s ruling.)

Freedom of Choice Act (- 55 points)
Points were subtracted if a state provides an affirmative right to choose abortion prior to viability without government interference.

Guaranteed Access to Prescriptions (- 10 points)
Points were subtracted based on whether a state explicitly guarantees a woman’s right to have her birth-control prescription filled.

Insurance Prohibition for Abortion (+ up to 10 points)
Points were added if the law prohibits insurance coverage for abortion for all or some public funds or employees; if the law prohibits abortion coverage unless an extra premium is paid; if the law requires insurers to provide a policy alternative excluding abortion; and the exceptions included in the law.

Low-Income Women’s Access to Abortion (and Restrictions on Low-Income Women’s Access to Abortion) (+ up to 25 points)
Points were added based on the circumstances under which the state medical assistance program funds abortion services: only to preserve the woman’s life; only in cases of rape, incest, or life endangerment; or in cases of rape, incest, life endangerment, and limited health circumstances. If a state medical assistance program funds abortion care in all or most circumstances, no points were added.

Low-Income Women’s Access to Family Planning (- 5 points)
Points were subtracted if the state provides increased coverage for Medicaid-covered reproductive-health-care services through the receipt of a federal Medicaid waiver. A state that applies for and receives a waiver is generally allowed to increase eligibility for Medicaid family-planning services and/or improve the quality of those services for a specific period of time. The duration, eligibility requirements, and covered services provided by each state’s waiver vary from state to state.

Other Anti- or Pro-Choice Law (+/- up to 25 points)
Points were added if a state has codified a choice-related public-policy position, or has imposed another significant restriction on or protection for a woman’s right to choose that does not fall within existing Who Decides? issue areas.

Post-Viability Abortion Restriction (+ up to 10 points)
If a post-viability abortion restriction contains adequate life and health exceptions and does not define viability as occurring at a particular point in pregnancy, no points were added. Points were added for the lack or inadequacy of the health exception and if the state defines viability as occurring at a particular point in every pregnancy.
METHODOLOGY

Protection Against Clinic Violence (- up to 15 points)
Points were subtracted based on if the law prohibits interference with entry or exit to a facility; physical invasion of the facility including trespass, property damage, arson, and bombing; excessive noise, odors, or telephone calls; and threats, including weapon possession at demonstrations. Points were also subtracted if the law creates a buffer zone, and/or permits injunctive relief.

Public Facilities and Public Employees Restriction(s) (+ up to 20 points)
Points were added if all or some public employees and/or facilities are prohibited from providing abortion services and the exceptions included in the law.

Refusal to Provide Medical Services (+ up to 20 points)
Points were added if the law applies to abortion, insurance coverage for contraception, family planning/birth control, sterilization, individual health-care instructions, or prescriptions.

Restrictions on Young Women’s Access to Abortion (+ up to 25 points)
Points were added if consent or notice is required before a minor may obtain an abortion, whose consent or notice is required, whether there is a physician bypass, whether the judicial-bypass procedure is adequate, whether there is a waiting period, and the exceptions included in the law.

Spousal Consent/Notice (+ up to 10 points)
Points were added based on whether spousal consent or notice is required.

State Constitutional Protection (- up to 20 points)
Points were subtracted if a state constitution protects the right to choose beyond the federal Constitution, and whether state constitutional protection prevents imposition of almost all restrictions on the right to choose or whether it allows some substantial restrictions.

Targeted Regulation of Abortion Providers (TRAP) (+ up to 30 points)
Points were added based on the following considerations: the totality of TRAP laws imposed, whether a state restricts the provision of abortion care to physicians, and whether laws are in effect. (Because of the breadth of TRAP laws, we have included in the summaries only select examples that illustrate the burdens these measures impose on abortion providers. NARAL Pro-Choice America Foundation maintains a list of each state’s TRAP laws.)

For all categories except TRAP: A standard deduction of 80% was taken if the law is enjoined or otherwise unconstitutional and/or unenforceable, and a smaller, variable percentage was taken if the law is partially enjoined or only some aspects are unenforceable.
ACKNOWLEDGMENTS

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DISCLAIMER

Who Decides? The Status of Women’s Reproductive Rights in the United States is strictly for informational purposes and does not constitute legal services or representation. For legal advice, a practicing attorney who has a thorough knowledge of current law in the state or locality and who is informed about all relevant details of the situation should be consulted.

NARAL Pro-Choice America Foundation does not guarantee the accuracy of the contents of this book. Laws change, often rapidly, and interpretations of statutes may vary. Legislation may have been acted upon, or cases decided, after the date this book went to press. Systematic bill- and case-tracking concluded on October 30, 2009.

NARAL Pro-Choice America Foundation hereby specifically disclaims any liability for loss incurred as a consequence of the use of any material in this book.

NARAL Pro-Choice America Foundation

Nancy Keenan, President
1156 15th Street, NW, Suite 700 Washington, DC 20005  202.973.3000
http://www.ProChoiceAmerica.org

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NARAL PRO-CHOICE AMERICA
STATE AFFILIATES

NARAL PRO-CHOICE ARIZONA
Kathren Coleman
Affiliate Manager
P.O. Box 16675
Phoenix, AZ 85011
P 602.258.4091
info@ProChoiceArizona.org
www.ProChoiceArizona.org

NARAL PRO-CHOICE CALIFORNIA
Amy Everitt
State Director
111 Pine Street
Suite 1500
San Francisco, CA 94111
P 415.890.1020
F 415.890.1025
info@ProChoiceCA.org
www.ProChoiceCA.org

NARAL PRO-CHOICE COLORADO
Emilie C. Ailts
Executive Director
1905 Sherman Street
Suite 800
Denver, CO 80203
P 303 394 1973
F 303 388 1692
Choice@ProChoiceColorado.org
www.ProChoiceColorado.org
www.PreventionFirstColorado.org

NARAL PRO-CHOICE CONNECTICUT
Jillian Gilchrest
Executive Director
56 Arbor Street
Suite 205
Hartford, CT 06106
P 860 523 1227
F 860 523 1229
info@Pro-ChoiceCt.org
www.Pro-ChoiceCt.org

NARAL PRO-CHOICE MARYLAND
Jennifer Blasdell
Executive Director
8121 Georgia Avenue
Suite 501
Silver Spring, MD 20910
P 301 565 4154
F 301 588 5790
info@ProChoiceMaryland.org
www.ProChoiceMaryland.org

NARAL PRO-CHOICE MASSACHUSETTS
Andrea Miller
Executive Director
15 Court Square
Suite 900
Boston, MA 02108
P 617 556 8800
F 617 338 2532
Choice@ProChoiceMass.org
www.ProChoiceMass.org

NARAL PRO-CHOICE MINNESOTA
Linnea House
Executive Director
2300 Myrtle Avenue
Suite 120
St. Paul, MN 55114
P 651 602 7655
F 651 602 7658
info@ProChoiceMinnesota.org
www.ProChoiceMinnesota.org

NARAL PRO-CHOICE MISSOURI
Pamela Sumners
Executive Director
1210 South Vandeventer Avenue
St. Louis, MO 63110
P 314 531 8616
F 314 531 8615
info@ProChoiceMissouri.org
www.ProChoiceMissouri.org

NARAL PRO-CHOICE MONTANA
Allyson Hagen
Executive Director
P.O. Box 279
Helena, MT 59624
P 406 442 2057
F 406 442 4801
mtnaral@mt.net
www.ProChoiceMontana.org

NARAL PRO-CHOICE NEW HAMPSHIRE
Pilar Olivo
Interim Executive Director
18 Low Avenue
Concord, NH 03301
P 603 228 1224
F 603 226 4505
info@ProChoiceNH.org
www.ProChoiceNewHampshire.org

NARAL PRO-CHOICE NEW MEXICO
Ann Piper
Foundation Board Chair
P.O. Box 97
Albuquerque, NM 87103
P 505 259 0659
info@ProChoiceNM.org
www.ProChoiceNewMexico.org

NARAL PRO-CHOICE NEW YORK
Kelli Conlin
President
470 Park Avenue South
7th Floor
New York, NY 10016
P 212 343 0114
F 212 343 0119
info@ProChoiceNY.org
www.ProChoiceNY.org
NARAL PRO-CHOICE AMERICA
STATE AFFILIATES

NARAL PRO-CHOICE NORTH CAROLINA
Mike Crum
C4 Board Chair
514 Daniels Street, #142
Raleigh, NC 27605
P 919.829.9779
F 919.827.8779
info@ProChoiceNC.org
www.ProChoiceNorthCarolina.org

NARAL PRO-CHOICE SOUTH DAKOTA
Casey Murschel
Executive Director
401 East 8th Street, Suite 330G
Sioux Falls, SD 57103
P 605.334.5065
info@ProChoiceSD.org
www.ProChoiceSD.org

NARAL PRO-CHOICE OHIO
Kellie Copeland
Executive Director
12000 Shaker Boulevard
Cleveland, OH 44120
P 216.283.2180
F 216.283.2184
Choice@ProChoiceOhio.org
www.ProChoiceOhio.org

NARAL PRO-CHOICE OREGON
Michele Stranger Hunter
Executive Director
P.O. Box 40472
Portland, OR 97240
P 503.223.4510
F 503.223.0251
info@ProChoiceOregon.org
www.ProChoiceOregon.org

NARAL PRO-CHOICE TEXAS
Sara Cleveland
Executive Director
P.O. Box 684602
Austin, TX 78768
P 512.462.1661
F 512.462.2007
info@ProChoiceTexas.org
www.ProChoiceTexas.org

NARAL PRO-CHOICE VIRGINIA
Tarina Keene
Executive Director
P.O. Box 1204
Alexandria, VA 22313
P 757.287.3356
info@NaralVa.org

NARAL PRO-CHOICE WASHINGTON
Lauren Simonds
Executive Director
811 First Avenue, Suite 456
Seattle, WA 98104
P 206.624.1990
F 206.624.4505
info@ProChoiceWashington.org
www.ProChoiceWashington.org

NARAL PRO-CHOICE WISCONSIN
Lisa Subeck
Executive Director
122 State Street, Suite 308
Madison, WI 53703
P 608.287.0016
F 608.287.0176
info@ProChoiceWisconsin.org
www.ProChoiceWisconsin.org

NARAL PRO-CHOICE WYOMING
Sharon Breitweiser
Executive Director
P.O. Box 271
Laramie, WY 82073
P 307.742.9189
F 307.742.9189
NaralProChoiceWY@netscape.net
NARAL PRO-CHOICE AMERICA FOUNDATION
MISSION STATEMENT

To support and protect, as a fundamental right and value, a woman's freedom to make personal decisions regarding the full range of reproductive choices through education, training, organizing, legal action, and public policy.

NARAL PRO-CHOICE AMERICA DIVERSITY POLICY

NARAL Pro-Choice America is committed to using the political process to guarantee every woman the right to make personal decisions regarding the full range of reproductive-health choices, including preventing unintended pregnancy, bearing healthy children, and choosing legal abortion. In order to fulfill this commitment, we will seek the input and meaningful participation of appropriate groups so that many voices will be represented and considered in our efforts to broaden and mobilize our constituency. In addition, NARAL Pro-Choice America will affirmatively recruit, employ, promote, and retain a diverse group of individuals.

We recognize that diversity in our programmatic work and at all levels of employment and throughout the organization, including our board of directors and affiliate network, is critical to achieving our mission and is consistent with our values as an organization. Therefore, we hold our executives and program managers accountable for acknowledging, accommodating, and advancing the changes needed to fully embrace the concept of diversity within our internal processes and our external programmatic efforts, including our campaign operations, grassroots organizing, and public-policy initiatives. NARAL Pro-Choice America is an equal opportunity employer and does not discriminate on the basis of race, sex, ethnicity, religion, socioeconomic status, age, disability, national origin, sexual orientation, gender identity and expression, marital status, or political affiliation. We accept responsibility for creating an environment where all people are encouraged and able to participate fully and with respect.
In North Carolina we had a major victory in 2009. We helped pass the Healthy Youth Act which provides access to age-appropriate comprehensive sex education for middle-school students. For the first time in 13 years students in North Carolina will receive the objective and scientifically based information they need to make healthy and educated decisions about their futures.

—NARAL PRO-CHOICE NORTH CAROLINA

Virginia severely limits a woman’s right to choose. Women seeking abortion care must not only receive a state-mandated lecture that often includes medically inaccurate information, but they’re also forced to wait 24 hours before having the procedure. Eighty-six percent of Virginia counties have no abortion provider. And to top it all off, Virginia is the home to at least 58 anti-choice crisis pregnancy centers versus only 22 comprehensive reproductive-health-care facilities. The services and options are stacked wholly against women of the Commonwealth.

—NARAL PRO-CHOICE VIRGINIA

In Minnesota, we have only one abortion provider serving women outside the metro area. With the 24-hour mandatory-delay law, Minnesota women are forced to drive hundreds of miles, sometimes for TWO full days, to exercise their legal right to choose. The shortage of providers, in conjunction with other anti-choice laws, hinders health-care access for women who live in rural areas.

—NARAL PRO-CHOICE MINNESOTA

While Texas women have a right to choose in principle, in reality there are abortion providers in only seven percent of counties – forcing women to drive several hundred miles and make personal sacrifices in order to exercise that legal right, and the hassle is compounded by a mandatory 24-hour delay. The shortage of providers and restrictive state laws greatly hinder access to health care for Texas’s rural women.

—NARAL PRO-CHOICE TEXAS

In Washington, this year we strengthened our Healthy Youth Act, requiring that the education programs taught in Washington schools are comprehensive, medically accurate, and proven effective. As a result, more young people have the information they need to make safe and healthy decisions.

—NARAL PRO-CHOICE WASHINGTON

In 2009, the Colorado legislature passed laws improving low-income women’s access to affordable contraceptives and prenatal care, helping to prevent unintended pregnancy and support healthy pregnancies. Pro-choice advocates in Colorado also worked tirelessly to increase contraceptive use by women at high risk for unintended pregnancy and to improve reproductive-health services in urban communities – cementing Colorado’s role as a leader in proactive change that turns pro-choice principles into action.

—NARAL PRO-CHOICE COLORADO