Testimony of Cary Brown, Executive Director of the Vermont Commission on Women
House Committee on Health Care
January 30, 2019

RE: H.57, an act relating to preserving the right to abortion

Good morning. My name is Cary Brown and I am the Executive Director of the Vermont Commission on Women. I'm pleased to have the opportunity to speak with you today about the connection between access to reproductive health care, including abortion, and women’s economic security.

The Vermont Commission on Women affirms that every woman has a natural and unalienable right to choose whether and when to bear children; the right to educational, medical, and counseling services to make that choice wisely; and the right to the appropriate support in order to create a secure economic future based on that choice.

The ability to decide when and whether to have a child is one of the most important factors in a woman’s economic well-being over the course of her lifetime. Having control over the timing of children allows women to increase their own education, make better investments in their early work and career choices, and create better outcomes for their children. Women’s access to birth control, including abortion, is tied to increased labor force participation, higher earnings, more advanced careers, and better financial conditions for their children and families.

ACCESS TO CONTRACEPTION IN GENERAL

In the 1960s and 1970s, the introduction of oral contraceptives and repeal of laws restricting the sale of contraceptives in general, coupled with the expansion of funding for family planning programs, provided a significant increase in women’s access to birth control. Looking back, it’s possible to link this access years later to an increase in women’s wages, their labor force participation, family incomes, and even their children’s college completion rates.¹

Children born after this access increased were 15% less likely to live in households receiving public assistance and 4% less likely to live with a single parent.²

This access also contributed to an increase in the number of women employed in non-traditional and professional occupations, and to higher occupational levels in general.³

Increased access to birth control can even be credited for helping to reduce the gender wage gap. One analysis showed that access to the birth control pill by younger, unmarried women in the 1960s and

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² Martha J. Bailey, Olga Malkova, and Zoe M. McLaren. Does Family Planning Increase Children’s Opportunities? Evidence from the War on Poverty and the Early Years of Title X. (2014)
1970s increased their hourly earnings by 8% by the time they were 50 years old. The same analysis concluded that the Pill can account for 10% of the reduction of the gender wage gap in the 1980s and 30% in the 1990s.

Access to birth control is linked to increases in women’s wages, in their participation in the workforce, and in their families’ reliance on their earnings. While having a child at all does create both an immediate decrease in women’s earnings and a long-term decrease in their lifetime earnings, delaying having a child can mitigate some of this loss. A delay allows time for investing in education and in early work experience, and women earn 3% more for each year they delay having children.

Children whose mothers had access to birth control have higher family incomes, are less likely to live in poverty, and are more likely to go to college.

**LACK OF ACCESS TO ABORTION**

The most common reason women give for seeking an abortion is that they aren’t able to afford the cost of supporting a child.

Low-income women are particularly impacted by lack of access to abortion; they are over five times more likely to become pregnant unintentionally than higher-income women, despite being sexually active at the same rates. Nationally half the women seeking abortions have incomes below the Federal Poverty Level and three-quarters reported not having enough money to pay for basic living expenses.

In one study, women who were unable to get the abortion they sought were almost four times as likely to have their household income fall below the Federal Poverty Level, and were more likely to report not being able to cover basic living needs.

Women who were denied an abortion were more likely to receive public assistance than those women who received abortions.

Women denied abortions were more likely to end up in the future raising children alone in single parent households than were women who received an abortion.

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5 Ibid.
6 Ibid.
8 Ibid.
11 https://www.ansirh.org/research/turnaway-study
13 https://www.ansirh.org/research/turnaway-study
14 https://www.ansirh.org/research/turnaway-study
15 https://www.ansirh.org/research/turnaway-study
16 https://www.ansirh.org/research/turnaway-study
Women denied an abortion have lower levels of full-time employment.\textsuperscript{17}

“Children born later to women who were able to get an abortion are more likely to live in households where there is enough money to pay for basic living expenses such as food, housing, and transportation than children born because abortion was denied. Abortion denial also affects maternal bonding. Women are much more likely to report feeling trapped as a mother, resenting their baby, or wishing for the old days when they had no baby after abortion denial than with the next child born after receiving an abortion.”\textsuperscript{18}

\textsuperscript{17} https://rewire.news/article/2018/10/04/stop-saying-that-making-abortion-illegal-doesnt-stop-them/
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