

The New York City Council

Legislation Details (With Text)

File #:	Res 2019		ersion:	A	Name:	Support a woman's right to abortic a ban on sex-selective abortions, racial stereotypes and undermine	which perpetuate
Туре:	Resc	olution			Status:	Adopted	
					In control	Committee on Women and Gende	er Equity
On agenda:	6/13/	2019					
Enactment date:					Enactmen	t #:	
Title:	Resolution urging the United States Congress and the New York State Legislature to support a woman's right to abortion, and to oppose a ban on sex-selective abortions, which perpetuate racial stereotypes and undermine access to care.						
Sponsors:	Margaret S. Chin, Carlina Rivera, Helen K. Rosenthal, Adrienne E. Adams, Diana I. Ayala, Karen Koslowitz, Laurie A. Cumbo, Vanessa L. Gibson, Alicka Ampry-Samuel, Ben Kallos, Carlos Menchaca, Stephen T. Levin, Farah N. Louis, Deborah L. Rose, Brad S. Lander, Inez D. Barron, Mark Levine, Darma V. Diaz						
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Resolution urging the United States Congress and the New York State Legislature to support a woman's right to abortion, and to oppose a ban on sex-selective abortions, which perpetuate racial stereotypes and undermine

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access to care.

By Council Members Chin, Rivera, Rosenthal, Adams, Ayala, Koslowitz, Cumbo, Gibson, Ampry-Samuel, Kallos, Menchaca, Levin, Louis, Rose, Lander, Barron, Levine and D. Diaz

Whereas, Most abortions (88 percent) occur during the first trimester of pregnancy, and over half of all abortions are obtained within the first eight weeks, per the United States (U.S.) Centers for Disease Control; and

Whereas, While therapeutic abortions arise from a medical problem in which allowing the pregnancy to continue to birth would endanger the pregnant person's health, selective abortions, which comprise a small fraction of all abortions, occur in those cases where a particular fetus is perceived as having undesirable characteristics, or when it is determined there are too many fetuses in pregnancy; and

Whereas, A sex-selective abortion is the practice of terminating a pregnancy based upon the determined sex of the fetus; and

Whereas, Sex-selective abortion bans, also known as "Prenatal Nondiscrimination Acts" ("PRENDA"), make it illegal for a doctor to provide abortion care if they suspect a pregnant person could be seeking an abortion due to a preference for the sex of the fetus; and

Whereas, Sex-selective abortion bans are discriminatory; they target people of color, Asian American, Native Hawaiian, Pacific Islander (AANHPI) women, trans, and gender non-conforming people, in particular, and seek to stigmatize their abortion decisions, ultimately restricting access to abortion care; and

Whereas, In 2013, sex-selective abortion bans were the second-most proposed abortion ban in the U.S., and continued to gain momentum in 2014 and 2015; and

Whereas, PRENDA legislation has been introduced in 26 states, including 13 of the 15 states with the largest foreign-born Asian American populations, and enacted in 11 states; and

Whereas, PRENDA legislation has been put up for a vote six times in the New York State Legislature;

and

Whereas, Lawmakers across the country who advocate for PRENDA perpetuate false and harmful racial stereotypes about people of color, especially AANHPI women, trans, and gender non-conforming people, including xenophobic claims that AANHPI communities do not value the lives of women; and

Whereas, Sex-selective abortion bans encourage racial profiling by medical providers, harm the doctorpatient relationship, potentially lead to the arbitrary delay or denial of reproductive health services, and further the stigmatization of women, trans, and gender nonconforming people, particularly those of AANHPI descent; and

Whereas, Some versions of sex-selective abortion bans also include a race-selective ban that would ban abortions performed on the basis of race, allowing abortion providers to act on false and racist agendas; and Whereas, PRENDA is a restriction that scrutinizes an individual's reasons for making the decision to terminate a pregnancy, thus opening the door to additional abortion bans that restrict reproductive autonomy under false pretenses; and

Whereas, New York City is home to the second-largest AANHPI community in the U.S. and they, along with reproductive health and justice advocates, have called for an end to such bans, condemning the deeply offensive, discriminatory rhetoric perpetuated by anti-choice advocates who support them; and

Whereas, With 70 percent of AANHPI immigrants in the U.S. having limited English proficiency and facing a high insurance and public benefits enrollment gap, AANHPI women, trans, and gender non-conforming people should not have to face more barriers to reproductive health care; and

Whereas, The U.S. Supreme Court's 1973 decision in Roe v. Wade established a constitutional right to abortion in many situations and struck down restrictions in dozens of states; and

Whereas, The Supreme Court recently announced that it will hear Dobbs v. Jackson Women's Health Organization, a case from Mississippi concerning a state law that seeks to ban abortions after 15 weeks of

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pregnancy, which advocates fear could undermine Roe v. Wade; and

Whereas, In recent polls by Gallup and Pew, 60 to 70 percent of Americans say they do not want the Supreme Court to overturn Roe v. Wade and, according to Pew, nearly 60 percent of Americans also say they favor abortion access in either all or most circumstances; and

Whereas, Access to safe abortions is necessary to ensure that pregnant individuals can plan their lives and families without risking their health in a way that makes most sense for themselves and their families; and

Whereas, When an AANHPI woman, trans or gender non-conforming person seeks an abortion, they deserve access to affordable, timely and safe abortion care in their community; now, therefore be it

Resolved, That the Council of the City of New York urges the United States Congress and the New York State Legislature to support a woman's right to abortion, and to oppose a ban on sex-selective abortions, which perpetuate racial stereotypes and undermine access to care.

LS #855 05/21/2019 05/18/2021 CGR