

Meeting Date: Sponsor(s):

City of Chicago

Office of the City Clerk

Document Tracking Sheet

5/29/2019

Smith (43) Hopkins (2) La Spata (1) Dowell (3) Sawyer (6) Tunney (44) Reilly (42) Harris (8) Sadlowski Garza (10) Cardenas (12) Thompson (11) Quinn (13) Austin (34) Martin (47) Mitts (37) Silverstein (50) Nugent (39) Hadden (49) Vasquez, Jr. (40) Lopez (15) Osterman (48) Coleman (16) Cappleman (46) Burke (14) Taylor (20) Rodriguez (22) Tabares (23) Scott, Jr. (24) Sigcho-Lopez (25) Maldonado (26) Taliaferro (29) Rodriguez Sanchez (33) Waguespack (32) Ramirez-Rosa (35) Valencia (Clerk) Lightfoot (Mayor) Resolution



R2019-358

Type:

Title:

Committee(s) Assignment:

Call for Illinois General Assembly to pass HB2495 known as "Illinois Reproductive Health Act" Committee on Human Relations and Health

Human Resolutions

RESOLUTION

URGING THE ILLINOIS GENERAL ASSEMBLY TO SUPPORT HB2495, THE REPRODUCTIVE HEALTH ACT

WHEREAS, every individual has a fundamental right to make autonomous decisions about one's own reproductive health; and

WHEREAS, every individual who becomes pregnant has a fundamental right to continue the pregnancy and give birth or to have an abortion; and

WHEREAS, no person who has terminated a pregnancy has made that deeply personal decision lightly; and

WHEREAS, accessing reproductive health care is not a criminal activity; and

WHEREAS, the Guttmacher Institute, a reproductive health non-profit, found that women around the world access abortion services at a statistically same rate whether they are legal and safe or illegal and unregulated; and

WHEREAS, deaths and injuries from unsafe abortions are preventable; and

WHEREAS, marginalized individuals are disproportionately affected by abortion restrictions as they are unable to seek safe and legal services in another country, state or county or access private care; and

WHEREAS, over the last 60 years, more than 30 countries have changed their laws to allow for greater access to abortion in recognition of its vital role in protecting women's lives and health; and

WHEREAS, in 1973 the Supreme Court ruled in Roe v. Wade to protect legal rights to safe abortions; and

WHEREAS, criminalization of abortion results in a chilling effect, in which medical professionals may apply more narrow restrictions than required by the law or in which women and girls may be deterred from seeking health care for life-threatening complications due to unsafe abortions or other pregnancy issues; and

WHEREAS, the United Nations Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW, or the Treaty for the Rights of Women), has consistently stated that restrictive abortion laws constitute discrimination against women; and

WHEREAS, under international human rights law, everyone has a right to life, health, and to be free from violence, discrimination, and torture or cruel, inhuman and degrading treatment, and that being forced into illegal, unsafe abortions constitutes a violation therein; and

WHEREAS, nearby states with restrictive laws are also served by Illinois' safeguards and as of 2017, about 5,500 out-of-state women had the procedure performed in Illinois; and

WHEREAS, in 2017, Illinois legislators passed a law that was signed into law by then Republican Gov. Bruce Rauner requiring state health insurance and Medicaid to cover abortions; and

WHEREAS, the Illinois Reproductive Health Act (IRHA) establishes and protects the fundamental right to safe and legal reproductive health care including contraceptives, maternal care and abortion care; and

WHEREAS, the IRHA protects all personal choices individuals may make about their reproductive health, including the right to choose or refuse birth control, the right to carry a pregnancy to term and give birth, and the right to choose or refuse abortion; and

WHEREAS, the IRHA codifies current standards of medical best practices on who can perform abortions and prescribe non-surgical abortion-related medications; and

WHEREAS, the IRHA regulates clinics that perform abortions like all other medical clinics; and

WHEREAS, the IRHA finally repeals the decades-old Illinois Abortion Law of 1975 and the Partial-Birth Abortion Ban Act, which, though currently enjoined by courts, established criminal penalties for performing an abortion and providing certain types of contraceptives, and allowed a husband to prevent his wife from having an abortion; and

WHEREAS, the IRHA amends the Illinois Insurance Code to ensure that private insurance companies will also cover health care costs for services related to abortion, adding to already required coverage related to contraception, infertility treatments, and maternity care; and

WHEREAS, we must ensure fundamental health care protections for future generations of women and safeguard the reproductive rights of women in Illinois and beyond; and

WHEREAS, protections provided by Roe v. Wade is under increasing threat in states across the country including in Alabama, Georgia, Kentucky, Mississippi, Ohio, Georgia and Missouri; and

WHEREAS, these state laws may lead to a US Supreme Court challenge of Roe. V. Wade, that may overturn federal protections; and

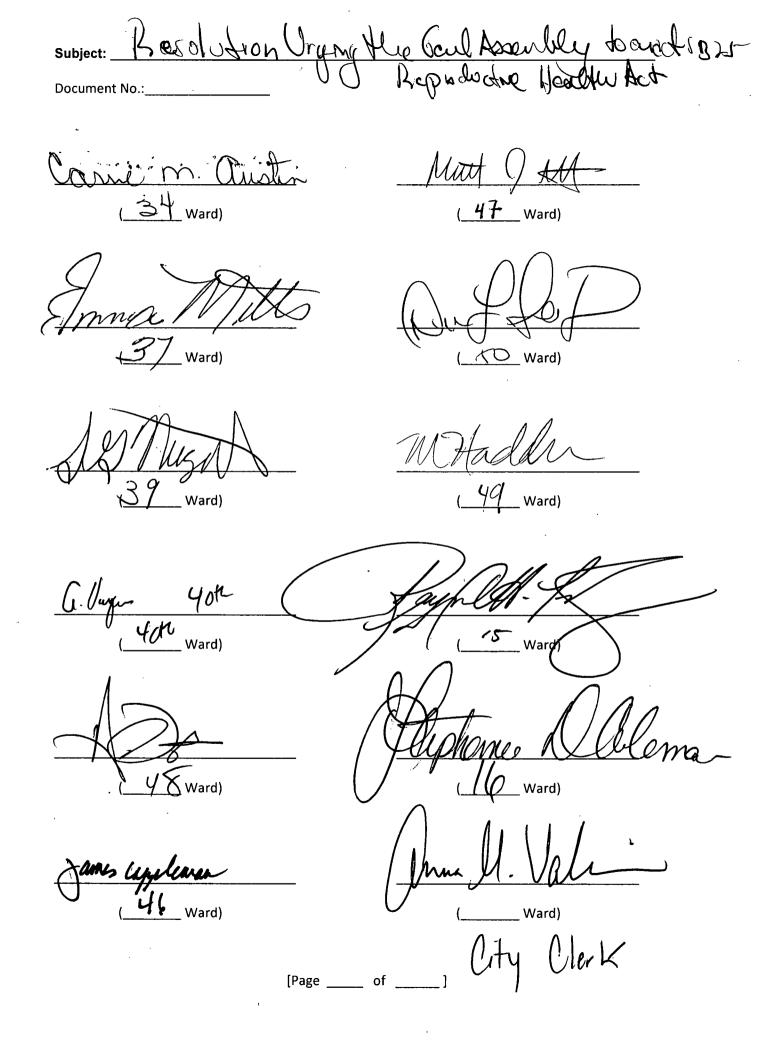
WHEREAS, should Roe v. Wade be overturned, the provisions of Illinois' restrictive Abortion Law of 1975 and Partial-Birth Abortion Ban Act will go into effect; and

WHEREAS, the IRHA was filed with the Clerk as H.B. 2495 by Representative Kelly M. Cassidy, with Chief Co-Sponsors including Representative Sara Feigenholtz, Representative Emanuel Chris Welch, Representative Marcus C. Evans, Jr., Representative Jehan Gordon-Booth and 35 additional co-sponsors; and

NOW, THEREFORE, BE IT RESOLVED, that the President and members of the Cook County Board of Commissioners do hereby recognize the need to keep abortion and reproductive health care safe and accessible; and

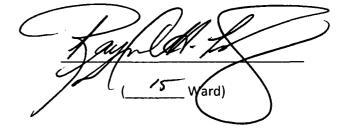
BE IT FURTHER RESOLVED, that the Cook County Board of Commissioners urges the Illinois General Assembly to pass H.B. 2495 of the 101st General Assembly, also known as the Illinois Reproductive Health Act, and support it in any manner possible to ensure residents can continue to be able to practice their fundamental rights to choose their reproductive futures.

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