In a political climate where Roe v. Wade is increasingly threatened, the fight for continuous federal funding of Planned Parenthood must be at the top of our agenda. It is no surprise that the Trump administration seeks to defund the nonprofit organization that provides vital reproductive healthcare services, including abortion, to women throughout the country. However, the enormous repercussions that would follow such an act are largely unknown to the public. It is essential that we continue to emphasize the harmful effects of undermining Planned Parenthood to ensure the election of presidential and senatorial candidates who make women’s health care a priority.

The consequences of defunding Planned Parenthood are hugely distortive. Of the organization’s 2.4 million annual patients, many are low-income and visit clinics for essential healthcare including cancer screenings, testing and treatment for sexually transmitted diseases, and contraception and family planning. To help pay for these services, Planned Parenthood receives over $500 million in federal funding, mostly in the form of Medicaid reimbursements (Planned Parenthood Annual Report 2017-2018). Specifically, about 60% of Planned Parenthood’s patients access health care at its clinics through publicly funded programs like Medicaid or Title X (Hersher 2017). By decreasing, or even putting a stop to, federal funding, we would see the unmet need for contraceptives and family planning escalate – particularly in marginalized communities. Historically marginalized communities, such as low-income individuals, women of color, and LBTQ people, are disproportionately impacted by restrictions on Planned Parenthood. These groups are more likely to have no health insurance and, thus, worse access to reproductive care. At the same time, they also represent the most at-risk groups in terms of rates of unintended pregnancies, prevalence of HIV infection and STDs, and maternal and infant mortality rates (International Planned Parenthood Federation). Defunding Planned Parenthood denies marginalized people the same quality and degree of healthcare that more privileged communities can access with ease.

In Alexis McGill Johnson’s op-ed for The Washington Post, the acting president of Planned Parenthood laments Republican opposition of the institution: “the sexual and reproductive health care our organization provides is not ‘political’; it has been politicized”. Abortion is one of the many services offered by Planned Parenthood to provide comprehensive sexual and reproductive healthcare for millions of people. Politicizing that care detracts from the underlying concept that everyone deserves equal access to quality healthcare, regardless of social identity. Johnson stipulates that “for as long as Planned Parenthood has existed, there have been those who are fearful of what we do – those who believe that women shouldn’t have control over their bodies; that young people don’t deserve honest, science-based information about sex; or that transgender people don’t deserve compassionate, affirming health care”. Many of these people sit in Congress and the White House, advocating for policies that will make it harder to access birth control, abortion, or even sex education.

Come 2020, it is our duty to reverse this trend and place candidates that support abortion rights in positions of power. “The patients of Planned Parenthood don’t have the luxury of pretending that politics can be ignored without experiencing a decline in the access and quality of sexual and reproductive healthcare.” Neither do we, if we wish to ever see an equal and healthy community.
Works Cited

