Historic Legislative Session Comes to a Close

by Amber G. Duke
Amber G. Duke is the Communications Director for the American Civil Liberties Union of Kentucky.

The 2020 General Assembly started down a familiar path, with legislators filing no fewer than seven pieces of anti-abortion legislation. A few weeks into the session, the novel coronavirus pandemic disrupted everything and many pieces of legislation were halted. Unfortunately, one of the most dangerous bills was combined with another and was sent to the Governor’s desk in the waning hours of the session.

Senate Bill 9 (SB9), the bill for the so-called “protection of infants born alive during an abortion,” was amended in the House to add the provisions of House Bill 451 (HB451). HB451 expands the powers of the Attorney General’s Office to enforce Kentucky’s abortion-related statutes, taking oversight of abortion providers away from the career health experts at the Cabinet for Health and Family Services. AG Cameron had already made clear that once he had this authority he would shut down abortion providers during the ongoing COVID-19 state of emergency.

Fortunately, all the calls and messages to Governor Beshear from members of KRCRC and allied organizations produced good results! The governor vetoed SB9 on April 24, and the legislature will not be able to override his veto because it has concluded its session.

In Kentucky, however, bills that don’t make it over the finish line one year have a way of reappearing. Robert Stivers, the president of the Kentucky State Senate, promises that the measures contained in SB9 will be “a top priority of the Senate during the 2021 session.” You can also consider the following list of bills a preview of the battles we’ll be fighting in 2021 and beyond:

Wayne’s Words

by the Rev. Wayne A. Gnatuk
Wayne A. Gnatuk is the Chair of Kentucky Religious Coalition for Reproductive Choice.

As I write these words, it’s the twenty-eighth day I’ve been sheltering in place. I know I’m not alone when I say that I have never seen anything like this! And it seems unlikely that we’ll be back to normal when you read these words in a month or so. Like everything else in our world, KRCRC has been impacted by the pandemic.

As I’ve written in previous newsletters, KRCRC is working this year to start two new chapters, one in Bowling Green and one in eastern Kentucky. Liz Tate, our part-time Outreach Worker, has been heading those efforts up. By late March, it was clear that the days of a pandemic are not the time to be starting new programs, and with Liz’s concurrence, KRCRC’s Board voted to put new chapter development on the back burner until the “all clear” is sounded. We are glad that Liz is employed full-time elsewhere, and our decision will not financially harm her.
The Painful Reality of Accessing Reproductive Care During COVID-19

by Meg Sasse Stern

Meg Sasse Stern is the Support Fund Director for Kentucky Health Justice Network. She became an abortion access advocate in 1999 as a volunteer clinic escort at EMW Women’s Surgical Center in Louisville KY. Meg writes and speaks about abortion access frequently in local and national spaces when she’s not flattening the curve by staying #HealthyAtHome.

At Kentucky Health Justice Network (KHJN), our Abortion Support Fund team has long had plans in place in case state or federal court decisions end legal abortions in the Commonwealth. What we could not anticipate was a fast-spreading virus that makes travel increasingly risky and wreaks financial havoc on many who already lack support and access to resources.

In recent weeks, KHJN has adapted its policies and practices to these new conditions, while continuing to accompany the people who call us for support to access essential, time-sensitive care. In addition to keeping our message lines open, offering case management, and funding abortions, gas, and hotels, we’re also sending hundreds of condoms and doses of free emergency contraceptives into communities where many people are isolating themselves. Through our All Access Eastern Kentucky partnership with Appalshop and Power to Decide, Kentuckians can access tools to apply for birth control through the mail using telemedicine visits through a program called BCBenefits.

KHJN’s statewide teams are small but mighty, and we can do a lot for Kentuckians facing barriers to care, but we cannot address every challenge presented by this crisis.

Already, we know that some people have delayed care for weeks, in part because our transportation volunteers cannot drive to the far reaches of the state to pick up someone who does not have a supportive companion, or lacks a reliable vehicle to drive to Louisville. Many parents are making unimaginable decisions about child-care at a time when their support systems are isolated from each other.

One Kentucky family received a fetal anomaly diagnosis and had to travel to southern Illinois for a 23-week
In the Age of COVID-19, Planned Parenthood’s Doors Stay Open and Services are Expanded

by Heather Bruner
Heather Bruner works as Donor Engagement Officer for Planned Parenthood of Indiana and Kentucky.

As the world works to flatten the curve and contain the community spread of COVID-19, the demand for abortions is on the rise. Planned Parenthood affiliates across the country are reporting rising numbers of patients, and our Louisville Health Center is prouder than ever to be able to serve our community under our current temporary license.

Because an increasing number of patients can’t go to urgent care clinics and emergency departments because of the surge in COVID-19 cases, it is critical that our doors stay open — to treat the urinary tract infection that, if untreated, could become a kidney infection; to treat a sexually transmitted infection that if untreated could lead to Pelvic Inflammatory Disease or infertility; to provide contraception to prevent pregnancy; and to terminate a pregnancy before termination is no longer an option.

Abortion services at our Louisville Health Center began in March, 2020, and we continue to go through the process to secure our full license. To meet the increased need for abortion care during this global pandemic, we will be providing additional days to the calendar for our patients. Meanwhile, our family planning services remain open five days a week providing cancer and STI screenings, pap tests, IUDs, and LEEP procedures.

Planned Parenthood acted quickly to implement CDC guidelines to protect our patients and staff. We instituted social distancing in our waiting rooms, and shortly afterward we began COVID-19 screenings and continue to take the temperatures of every person who visits our centers. Our clinicians have used this opportunity to educate on the importance of social isolation, and we are currently providing face masks to all patients.

Our Education Department has also been very innovative in its response to the virus. Our Teen Council, which typically meets weekly, has continued to meet virtually. Staff have been able to continue their lesson plans while also supporting these high school students at a time when they are unable to enjoy many rites of passage such as spring breaks, proms, and graduations.

Planned Parenthood Advocates of Kentucky and our Political Action Committee have continued their work, which has prevented the passage of any bills that restrict abortion in this legislative session. They are now moving forward with virtual interviews of candidates for potential endorsement.

Planned Parenthood has long prided itself on providing care that is compassionate and innovative. Our rapid response in this time of tragedy has saved lives and strengthened our community. As we go through this time together, trust that our doors will stay open and we will continue to see Kentuckians. Stay safe, and we will see you all on the other side.

Do you shop at Kroger, with a Kroger Plus card? You can be giving KRCRC a financial boost, at no cost to you! Two simple steps:
2. Follow the instructions to select an organization.
KRCRC is #SU106.
Now you’re ready to help KRCRC every time you shop! Just use your Kroger card (including at the gas pump), and KRCRC will receive a small percent of your purchases. Thank you!
**Fighting for Reproductive Choice**

by Stephanie Compton

*Stephanie Compton recently joined the KRCRC Board of Directors. Here, she explains why she made this commitment.*

I am excited to join KRCRC and continue fighting for reproductive choice. Kentucky has always been my home and a place I love. The extreme legislation and rhetoric brought to Kentucky during Governor Matt Bevin’s term was ugly. It showed an alarming trend and complete disregard for separation of church and state.

For the first time in my life, I have become civically engaged. I have advocated for public education, labor, reproductive choice, and gun sense laws in Frankfort and DC. It was a big lifestyle change from my first forty years—a change I wish to continue.

Just to share some more about me: I am from Hodgenville, Kentucky and graduated from Larue County High School in 1992. I attended Morehead State University and obtained a Bachelor of Arts degree in Sociology. I currently reside in Spencer County with my husband and three children. I became a candidate for State Senate in 2018 to promote progressive policies in Kentucky. In 2019, I was elected as Chair of the Spencer County Democratic Party. I also became an alumna of Emerge Kentucky.

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**Legislative Session Cont. from page 1.**

- House Bill 67, an anti-abortion constitutional amendment, would have added political language about abortion to Kentucky’s constitution. It would assert that there is no legal right to an abortion that can be argued through the provisions of Kentucky’s constitution. The bill passed the House 71-21 and died in the Senate.

- House Bill 370 would have targeted abortion providers with new, burdensome regulations on the handling of biological tissue. The bill died in the House.

- House Bill 391 would have allowed the Auditor of Public Accounts to perform an annual audit of abortion reports to Vital Statistics. The bill died in the House.

- House Bill 142, the abortion gag rule, would have prohibited the payment of funds from public agencies to any entity that performs, induces, refers for, or counsels in favor of abortions. The bill died in the House.

Proactive pieces of legislation often take years to move in hostile legislatures like Kentucky’s. An important piece of proactive legislation, House Bill 138 (HB138), the Maternal CARE Act, died in the House without a hearing. The legislation, sponsored by Rep. Attica Scott, would address racial disparities in maternal mortality. Currently, the maternal mortality rate is 2.5 times as high for Black women as for white women. HB138 would require implicit bias training for medical professionals, more access to doula services for poor Kentuckians, and better tracking of maternal and infant deaths in the Commonwealth. The ACLU-KY Advocacy Team looks forward to continuing our work with Rep. Scott on this important measure.

As always, please follow ACLU-KY on Facebook, Twitter, and Instagram for reproductive freedom updates throughout the year. Thank you, KRCRC members and supporters, for your commitment, dedication, and partnership in this work.
Care During Covid-19  Cont. from page 2.

termination. KHJN worked with the Midwest Access Coalition and Hope Clinic in Granite City, Illinois, to make sure this family’s travel and care expenses were covered. Organizations can certainly provide relief by covering costs, but this family had to endure the extra stress associated with a road trip and a hotel stay during a pandemic, and they also experienced TWO flat tires on their journey.

These examples show that the Kentuckians who are hit hardest during this crisis are those who already face systemic barriers to equity and justice. Their stories also demonstrate how dangerous any restriction on abortion access is, for any reason. We’ve always known that access to birth control and abortion in Kentucky is in dire straits. We could not anticipate a fast-moving, invisible and deadly virus that turns what could be a simple appointment into a complex journey that could be dangerous.

Imagine how much safer it would be to access care if ten Kentucky counties had abortion providers instead of only one. What if Kentuckians could meet with abortion providers using telehealth, as we are doing for so many other basic needs? This is why it is not sufficient to write exceptions into abortion bans or to have only one or two abortion clinics per state. The calculated erosion of abortion access has created a far more complicated, and sometimes dangerous scenario for those needing this time-sensitive essential care during this pandemic.

I am writing this article a few days into our second month of confirmed COVID-19 cases in Kentucky. We are only a few weeks into our shelter-in-place order. Kentucky families are suffering in ways that cannot be fully understood. Not only will this anguish continue for weeks and likely for months, but people will also find comfort, companionship, and even joy during this time of social distancing and isolating with their partners. There will be an increase in pregnancies during this pandemic. Some of those pregnancies will be the result of non-consensual actions. Some pregnancies will be wanted, but many will require termination. People who need to terminate a pregnancy during or following this pandemic deserve to have access to that procedure quickly and with dignity. We look forward to supporting them, but we know it will be harder than it needs to be.

Care With Compassion

by Melissa Bane Sevier

Melissa Bane Sevier is a minister, writer, and photographer. She is a member of KRCRC’s Lexington chapter.

On March 7, just before the Governor of Kentucky asked people to stop gathering in groups, KRCRC sponsored a one-day Compassionate Care Training session in Louisville.

Trainers Wayne A. Gnatuk and Melissa Bane Sevier led participants in discussions of how to support persons who are facing reproductive decisions and/or experiencing reproductive loss.

The group was somewhat diverse in age and experience, coming from a graduate (seminary) community, from service professions, and from other life circumstances. They learned about the history of attitudes and policy regarding reproduction in our country, about current local law, and about providing appropriate spiritual care for those who need it.

An overview of different faiths and spiritualities was accompanied by reminders to allow the person seeking care to lead the conversation. Throughout, the care-seeker was the focus of the day’s work, and spiritual care was always at the heart of every reflection.

In the future, post COVID-19, KRCRC hopes to hold more Compassionate Care Training sessions throughout the state. Contact us if your faith community or group would like to host one.
The Evangelical Lutheran Church in America (ELCA) is among the largest Christian denominations in the country with about four million members. The 1991 Churchwide Assembly adopted the “Social Statement: Abortion” that remains the policy statement of the church today. While it supports the protection of abortion rights, the church’s official position is both moderate and nuanced.

In the Social Statement, the ELCA acknowledges difference of opinion within the church on the question of abortion and suggests a moral obligation to deliberate on divisive questions. The Pew Research Center’s Religious Landscape Study illuminates the divisions among ELCA members: in 2014, 65% of members said that abortion should be legal in all or most cases and 32% suggested that it should be illegal in most or all cases. This indicates a slight strengthening of support for abortion rights since the prior Pew study in 2007 when the ratio was 61% supportive of abortion rights to 33% opposed.

According to the Social Statement, abortion should be an option of last resort. This is rooted in the convictions of the faith, including the beliefs that humans are endowed with dignity and created in the image of God, that the gift of human life comes from God and has intrinsic value, and that love of one’s neighbor embraces the most vulnerable among us, including the pregnant woman and the fetus. However, the ELCA statement goes on to say that, if abortion is to be a last resort, it is incumbent on the church to advocate a reduction in the number of unintended pregnancies through sex education and contraception and to support families through improved social services and through policies such as parental leave.

The church further notes the moral complexities of many situations in which people seeking abortions find themselves. Beyond general compassion for those facing difficult circumstances, the Social Statement especially highlights non-consensual intercourse, threat to the life of the mother, and fetal abnormality as circumstances in which a decision for an abortion may be morally justifiable.

The ELCA Statement opposes many legal restrictions on abortion access, while also stating that there should be some regulation of abortion. The statement opposes the outlawing of abortion in all cases, laws preventing access to information about all available options for people facing unintended pregnancies, laws that deny access to safe and affordable services for morally justifiable abortions, and laws intended to harass those contemplating an abortion.

This position statement has not changed in decades. The ELCA Presiding Bishop, the Rev. Elizabeth Eaton, responded to newly aggressive attacks on abortion rights in various states, including Kentucky, by issuing a letter on abortion in May 2019. While reaffirming the 1991 Social Statement, Bishop Eaton wrote, “Amid the legislative challenges to access to abortion, we must remember that this church supports ongoing access to legal abortion as well as access to abortion services and reproductive health care that is not restricted by economic factors.”

Help KRCRC continue our work
Donate online at krcrc.org
Or send a check to:
KRCRC, P.O. Box 4615, Louisville, KY 40204
Reproductive Choice: How to Solve the Problem

by Honi Marleen Goldman

Honi Marleen Goldman is a journalist and the director of Reproductive Rights for Kentucky PAC.

This controversy over reproductive choice should not be happening. In order to reverse this abuse (and yes, this is domestic violence), we need to elect legislators who will protect and advance reproductive justice as well as to re-elect those officials who have stood up for us.

There are two organizations that focus on these goals and need your financial support:

Reproductive Rights for Kentucky PAC (RRFKY) is the only pro-choice federal PAC (political action committee) in Kentucky. In 2014, the year-old PAC financially and publicly endorsed 18 Kentucky state and federal candidates; in 2016, 12 candidates; and in 2018, 25 candidates. RRFKY will vet every candidate after the June 23 primary. All contributions go directly to the qualified candidates.

For information and online donations: www.rrfky.org or mail to P.O. Box 33071, Louisville KY, 40232-3071.

VoteNowKY is a non-partisan, 501(c)(3) project sponsored by the Coalition of Women’s Organizations along with other non-partisan groups. Its aim is to encourage voter turnout. VoteNowKY concentrates on populations who do not usually vote: Generation Z, millennials, and residents in low-turnout precincts. Using all forms of social media and direct flyers and posters, VoteNowKY is able to reach these important demographics.


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KRCRC Reproductive Justice Salon, January 26, 2020

In commemoration of the Supreme Court’s Roe v. Wade decision, which established a constitutional right to abortion, KRCRC held a “Reproductive Justice Salon” at Waterfront Botanical Gardens in Louisville. The Rev. Cari Jackson, a leader of the national Religious Coalition for Reproductive Choice, was keynote speaker, and she set the tone for a program that featured poetry, music, and reflections by members of our community.

The Reverend Cari Jackson (center) with Carole Gnatuk and Carol Savkovich, who provided musical interludes.
"Opt In" vs. "Opt Out":

We Goofed.

"Opt IN"

Most of KRCRC's followers recently received a letter from us, asking "Are You With Us?" and requiring that, to stay on our list, you must RETURN the letter to affirm your belief in our mission and that you wished to be a KRCRC member.

We said that, if you did not return the letter, we would remove you from our rolls.

Live and learn... KRCRC's board members are only human, and we discovered it was a mistake to require you to take the extra step to "Opt In." We expected a decrease in our numbers as we reduced our membership to only those supporters who directly expressed an interest in continuing their membership. However, we never dreamed that our good faith effort to become "leaner and stronger" would see fewer than 200 of our 4,000 members returning their letter. After speaking with a good handful of KRCRC supporters who did not get around to returning their letters, we feel sure that many more wish to remain with us, but simply never returned their letters.

"Opt OUT"

Rather than lose those of you who DO wish to stay informed through KRCRC's newsletter, we are switching to an "Opt Out" approach:

If you do NOT support our mission, and/or no longer wish to receive KRCRC's newsletter, please let us know at info@krcrc.org or (866) 606-0988 and we will remove your name.

Your board sincerely apologizes for this mistake. We took a risky approach in an attempt to strengthen our organization, but it just didn't work. Thank you for your understanding.

KRCRC MISSION STATEMENT

The mission of the Kentucky Religious Coalition for Reproductive Choice is to mobilize the moral power of people of faith and conscience to safeguard and advance reproductive justice in the Commonwealth of Kentucky.

We do this through advocacy, education, and support of organizations with related goals.