

# The Local Reproductive Freedom Index: A Guide for Reviewers

This document is designed to provide local advocates and policymakers, including department of health staff and elected officials, with some background on the Local Reproductive Freedom Index and how to review our research on your city and county. As a national organization supporting local-level advocacy for reproductive health, rights, and justice, we know how important it is to follow the lead of those who live and work in the communities we are evaluating, and to also respect their limited time and capacity. In that spirit, we welcome your feedback and connection throughout this process in whatever way is easiest for you.

# About the National Institute for Reproductive Health

The National Institute for Reproductive Health (NIRH) builds power at the state and local level to change public policy, galvanize public support, and normalize women's decisions about abortion and contraception. Using a partnership model, we provide state and local advocates with strategic guidance, hands-on support, and funding to create national change from the ground up. We are a force multiplier – we form strategic partnerships with a wide range of organizations to directly impact the reproductive health and lives of women across the country.

At the national level, we go where others don't, engaging in groundbreaking public opinion research, proactive policy initiatives, and innovative advocacy campaigns to shape a new national conversation about reproductive freedom.

With the Local Reproductive Freedom Index, NIRH has built upon its long history of local policy advocacy. In 2008, NIRH launched the Urban Initiative for Reproductive Health to serve as a catalyst for progress for reproductive health, rights, and justice advances at the city level. Since 2008, NIRH has provided direct grants and hands-on support to more than 170 reproductive health, rights, and justice organizations in 43 states and 64 localities across the country.

### About the Local Reproductive Freedom Index

The Local Reproductive Freedom Index: Evaluating U.S. Cities (Local Index) evaluates the reproductive health, rights, and justice policies of cities across the United States. Cities have a critical opportunity to mitigate a hostile climate created by state and federal governments and to innovate in ways that advance reproductive freedom for their residents. The Local Index analyzes the policies in place in the nation's most populous cities and offers suggestions for how cities can maximize their potential to gain ground on reproductive freedom.

The Local Index is intended to be a positive and forward-looking report. NIRH does not use this report as an opportunity to "call out" or criticize cities with lower scores. The narrative of the report focuses on the progress and leadership of each city, while lifting up the opportunities they have to take further action.



First released in October 2017, NIRH is updating and expanding the second edition of the report, set to be published in October 2019. The 2019 edition will include 10 new cities, for a total of 50 cities, and includes some refinements and additions to the indicators.

The report evaluates local policy through December 31, 2018.

### How NIRH Approaches the Complexity and Diversity of Municipal Government

The Local Index uses the word "city" in many of our materials, but it is important to note that the data and the indicators reflect the work of multiple bodies of government that may contain multiple jurisdictions. Where possible, this Local Index reflects city-level policies, and NIRH's researchers first look at policies in place on the city level. However, in many cities, several of the policies or programs included in our indicators are the responsibility of county government. Therefore, counties are also included in our analysis when applicable. A policy that is in place only on the county level is marked by an asterisk. County policies have equal value to city policies. The Local Index does not penalize cities for "not having" a policy in place when it is in fact addressed by the county and the city's residents benefit from it. This also recognizes the very significant role of county government in the arena of public health.

Municipal government structure can vary in other ways. For example, many cities contain multiple school boards, each of which has its own policy on sexuality education or reproductive health care within SBHCs. Decisions about indicators impacted by this variability are made on a case-by-case basis.

If you have questions about NIRH's reasoning for certain decisions, please email us or set up a call. We encourage you to share information about your city's unique government structure to help us make the most informed decision possible.

# **Scoring the Indicators**

A city can receive one of five marks per indicator:

- **Y**, or "Yes," is used when a city has the policy or program in place.
- **N**, or "No," is when a city does not have the policy or program in place.
- L, or "Limited," is used when a city has taken some step towards achieving the measure but has not acted to the fullest extent possible, such as establishing a policy that only impacts municipal employees. Limited measures count toward a city's overall score as a partial credit.
- P, or "Preempted," is used if state policy prevents a city from acting on a matter, such as setting its own minimum wage; imposes penalties on a city for taking an action that makes it functionally impossible for the city to address the issue itself, such as denying state funding to county hospitals that provide funding for abortion care; or makes it unnecessary for the city to take further action, such as implementing a statewide buffer zone that protects all clinics within the state and, therefore, city. Preempted measures do not impact the city's overall score.
- **N/A**, or "Not Available," denotes that NIRH was unable to find sufficient information on a given measure to determine its status as of December 31, 2018. N/A measures do not impact the city's overall score.

When an asterisk is next to the mark, it denotes that this is related to county policy instead of city policy.



### **Understanding the Indicators**

For each indicator, we have explained what it means, when necessary, as well as the sources used. For more information on any of these indicators, please email us or set up a call.

#### **Building Healthy and Just Communities**

*Sources include Fight for \$15 and other economic justice organizations, immigrants' rights organizations including the Immigrant Legal Resource Center, Fair Vote, Represent Women, and independent research.* 

- **Positive public awareness campaigns on sexual and reproductive health**: city engages in public education or awareness campaigns that highlight important local issues related to sexual and reproductive health. The campaigns are not stigmatizing and are based on community needs. If the city's social media presence includes sex-positive sexual and reproductive health messages, the city may receive a "Limited" depending on the extent of the messaging
- Menstrual equity initiative: city has taken a step or steps towards ensure that all people have access to quality menstrual hygiene products, including but not limited to access to free products in high-needs settings, such as jails and juvenile detention centers, middle and high schools, job training sites, or shelters; and/or a repeal of tax on menstrual hygiene products
- **"Shield" law for victim reporting**: the city has a policy that protects sex workers from arrest or prosecution when they report a violent crime, such as sexual assault, human trafficking, or robbery, as a victim or a witness
- **Paid sick leave**: city has a paid sick leave policy in place for all employees; if the policy is only available to a limited population, the city receives a "Limited"
- \$15 minimum wage: policy requiring a \$15 minimum wage or higher; if the minimum wage only applies to a specific population, such as municipal employees or government contractors, the city receives a "Limited"
- Support for immigrants to access reproductive health care: city supports access to reproductive health care specifically for immigrants, including those who are undocumented, through measures such as providing funding to community- based organizations that work with undocumented people, declaring itself a sanctuary city to make reproductive health care safer to access, or offering a locally accepted municipal ID program to decrease barriers to accessing public services like reproductive health care
- Advancing democracy: city has taken steps to protect voting rights or advance democratic values, including but not limited to:
  - Voting rights for non-citizens
  - Voting age under 18
  - Voting reminders or education program
  - Matching funds for local candidates
  - Maximum contribution limits
  - Local campaign finance reform
- Anti-discrimination ordinances for employees: Gender identity: city bans discrimination against employees based on their gender identity
- Anti-discrimination ordinances for housing: Gender identity: city bans discrimination in housing based on tenants' gender identity



#### Funding and Coverage for Reproductive Health

This indicator looks at funding from the city and/or county budget; state or federal funding are not counted. Sources are independent research, including city and county budget documents.

- Funding for abortion: Municipal funding is spent directly on abortion care
- Funding for STD/STI testing & prevention: STD/STI testing, prevention, or treatment; expedited partner therapy; if the only funding the city provides is used to support for a coalition that addresses STDs/STIs, city receives a "Limited"
- **Municipal insurance coverage of abortion**: to receive full points, there should be an explicit municipal policy requiring insurance coverage of abortion for all municipal employees or it should be very clear that all employees have abortion coverage; if some employees receive coverage but it is not universal, cities receive a "Limited"
- **Funding to train providers in reproductive health care**: funding for a provider training initiative, including but not limited to:
  - LARC provision, including removal
  - Contraceptive counseling
  - Reproductive health care for LGBTQ+ patients, young people, undocumented people, or other populations with specific needs
- Funding for contraception: funding for contraception in any form, including condoms
- Funding for community-based organizations to provide comprehensive sex education: funding to support community-based organizations that provide comprehensive sexuality education in schools or in after-school programs

### **Protecting Abortion Access**

#### Sources are the National Abortion Federation and independent research.

- Clinic safety ordinance: Clinic safety ordinances include policies that, consistent with the First Amendment, limit how close protestors can be to the entrance of an abortion clinic; create a zone around the entrance that limits how close demonstrators may approach another person; create enhanced penalties for crimes committed in such a zone; and/or prohibit the intentional use of force, the threat of force, or physical obstruction to interfere with the attempt to obtain or provide reproductive health care services.
- **Regulations on anti-abortion pregnancy centers**: An ordinance is in place to protect against manipulative or deceitful behavior from anti-abortion pregnancy centers (AAPCs), including but not limited to requiring that they explicitly inform people about the scope of their services and/or whether they have licensed medical providers on staff; that they maintain confidentiality of personal information of those seeking their services; that they restrict local funding to AAPCs; or that establish consumer protections against false advertising.
- Local protections for abortion clinics & providers: The city has taken action to protect or support abortion clinics and abortion providers, including but not limited to:
  - o Clinic escort training program sponsored by the city
  - Noise regulation that protects clinics
  - Ordinance banning residential picketing
  - Parking regulations
  - Police training initiative related to abortion safety



- Zoning that benefits abortion clinics
- **Public awareness about access to abortion care**: The city has led a public awareness campaign or initiative related to abortion access.
- Anti-discrimination ordinances for employees: Reproductive health decisions: city bans discrimination against employees based on their reproductive health decisions, including the decision to use contraception or choose an abortion
- Anti-discrimination ordinances for housing: Reproductive health decisions: city bans discrimination in housing based on reproductive health decisions of tenants, including their decision to use contraception or choose an abortion

### Supporting Families

Sources include A Better Balance and independent research.

- Supportive breastfeeding policies: city has policies or initiatives, such as workplace accommodation or breastfeeding support programs, that destigmatize and facilitate breastfeeding
- **Paid family leave for municipal employees**: city has a paid family leave policy in place for municipal employees
- Environmental protections for maternal & reproductive health: city has a policy or program in place related to environmental justice that has been *explicitly* linked to the need to protect maternal, infant/child, or reproductive health, including but not limited to:
  - Protections for nail salon workers or other workers exposed to toxic chemicals
  - Banning fracking
  - Regulation of radioactive activity
  - Regulation of BPA
  - Regulation of skin lightening creams
  - Water justice
- Anti-discrimination ordinances for employees: Pregnancy & family status: city bans discrimination against employees based on pregnancy and family status. If the anti-discrimination ordinance includes only pregnancy or only family status, the city receives a "Limited"
- Anti-discrimination ordinances for housing: Pregnancy & family status: city bans discrimination in housing based on pregnancy and family status

### **Supporting Young People**

Sources include the Sexuality Information and Education Council of the United States (SIECUS) and independent research.

- **Support for pregnant & parenting youth**: policies are in place to support pregnant and parenting youth that do not stigmatize young parents or divert them into ineffective or inappropriate programs, such as:
  - Daycare in schools
  - Flexible graduation policies
  - Breastfeeding accommodation policies



- Pregnant & Parenting Youth Bill of Rights is in place
- Funding for comprehensive sexuality education (CSE): city has allocated its own funding for CSE in schools, or has receive federal funding. CSE has a broad definition, and for the purpose of the Local Index, NIRH generally defers to how the city chooses to define it, but the curriculum should be evidence-informed, scientifically accurate, and age-appropriate with lessons that cover healthy relationships, effective STI/STD prevention, and the range of methods of contraception. While abstinence should be included in lessons around prevention of STIs/STDs, HIV/AIDS, and unintended pregnancy, CSE must give students the tools they need to make informed decisions about their lives and health.
- **Comprehensive sexuality education**: city has a policy for CSE in all schools; if only some districts have a CSE policy, the city receives a "Limited."
- **Reproductive health care in school-based health centers (SBHCs)**: SBHCs provide reproductive health care in some form, such as dispensing birth control or STI testing; if SBHCs provide referrals for RH care or offer condoms but no other contraception, the city receives a "Limited"

### Taking a Stand

Cities receive a point in "Taking a Stand" if they have passed a resolution or issued a proclamation on these issues.

- **Opposition to deceptive practices of anti-abortion pregnancy centers**: city has taken a stance against the deceptive and manipulative practices of anti-abortion pregnancy centers
- Support for abortion coverage, including EACH Woman Act: city has taken a stance against bans on abortion coverage and in support of comprehensive reproductive health care coverage, including abortion, for all people regardless of where their insurance comes from
- Pro-choice stance on state or federal legislation or ballot initiatives: city has taken a stance on state or federal legislation or ballot initiatives that demonstrates their commitment to reproductive rights by either establishing its opposition to an anti-choice policy on the state or federal level, or expressing support for a state or federal policy that would advance reproductive freedom. For example, a city could pass a resolution declaring its opposition to "sex selective" abortion bans, which are predicated on misinformation and harmful stereotypes about the Asian and Pacific Islander community
- **Support for anti-discrimination**: city has declared its support for anti-discrimination policies on any of a range of issues, including race, ethnicity, religion, sexuality, gender identity, income, immigration status, disability status, or more

#### Local Landscape

Sources listed in the definition of each indicator below.

- **Population, 2017**: American Communities Survey, unless a city is not tracked by ACS due to its population size. In that case, data is most often taken from the city itself
- **Median income**: American Communities Survey, unless a city is not tracked by ACS due to its population size. In that case, data is most often taken from the city itself
- Annual costs (family of 4): according to the Economic Policy Institute Family Budget Calculator (<u>https://www.epi.org/resources/budget/</u>)



- **Number of abortion clinics**: sources include the National Abortion Federation, the Abortion Clinic Network, Planned Parenthood Federation of America, and independent research
- Number of Title X clinics: Office of Population Affair's Title X Family Planning Directory (<u>https://www.hhs.gov/opa/sites/default/files/Title-X-Family-Planning-Directory-November2018.pdf</u>)
- Number of school-based health centers: this tracks all school-based health centers, regardless of whether or not they offer reproductive health care; sources include the School-Based Health Alliance and independent research
- Number of anti-abortion pregnancy centers: source include the ReproAction Fake Clinic Database (<u>https://reproaction.org/fakeclinicdatabase/</u>) and independent research
- Maternal mortality rate: this term may be defined differently from city to city; found via independent research, most often from the local or state health department. This indicator does not break down the maternal mortality rate by race because the information is typically not available on the local level; however, it is important to recognize that significant racial disparities in the maternal mortality rate – with Black women dying at much higher rates than white women – exist in most places, which are masked by the overall rate
- **Teen pregnancy/teen birth rate**: this term may be defined differently from city to city; independent research; when available, this number most likely comes from the local health department
- **Number of Catholic hospitals**: the number of Catholic hospitals of all hospitals in the city; sources include MergerWatch and independent research
- **Rates of incarceration**: this is the rate of people from the community who are incarcerated; sources include the Vera Institute and independent research
- Infant mortality rate breakdown by race: this term may be defined differently from city to city; found via independent research, most often from the local or state health department independent research
- **Population breakdown by race**: American Communities Survey, unless a city is not tracked by ACS due to its population size. In that case, data is most often taken from the city itself
- Sexuality education policy: NIRH follows the city's lead in how they define their sexuality education policy. If there are multiple school districts in a community with a range of different policies, NIRH will write "multiple districts." If the school district explicitly does not have a policy, NIRH will write "no policy." Found via independent research, often from school district websites.

# Spotlight

Spotlights on innovative city policies or programs, or significant challenges that a city or county faces, will be included throughout the report. If you have an idea for a potential Spotlight based on your city or county, please send us an email or set up a call.