

EXHIBIT 4

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF ARKANSAS
CENTRAL DIVISION

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|--|---|----------------------------|
| FREDERICK W. HOPKINS, M.D., M.P.H. <i>et al.</i> , |) | |
| |) | |
| Plaintiffs, |) | Case No. 4:17-cv-00404-KGB |
| |) | |
| v. |) | |
| |) | |
| LARRY JEGLEY <i>et al.</i> , |) | |
| |) | |
| Defendants. |) | |

**EXPERT DECLARATION OF SHEILA M. KATZ, PH.D., IN
SUPPORT OF PLAINTIFFS’ MOTION FOR A SECOND PRELIMINARY
INJUNCTION AND/OR TEMPORARY RESTRAINING ORDER**

I, Sheila M. Katz, Ph.D., declare the following under 28 U.S.C. § 1746 and penalty of perjury:

1. I understand from Plaintiffs’ counsel that the Plaintiffs in this suit are challenging four laws: (1) a ban on a method of second-trimester abortion, the dilation and evacuation procedure (D&E Ban); (2) a law that requires Plaintiff to seek patients’ medical records about their current and prior pregnancies (Medical Records Mandate); (3) a law that requires Plaintiff to tell local law enforcement about teenagers’ abortions, even when there is no evidence of abuse or criminality, and require Plaintiff to provide fetal tissue to law enforcement labeled with the patient’s name (Local Disclosure Mandate); (4) a law that requires notification of the abortion to the sexual partner of each and, if they are minors, their parents, in the context of disposal of the fetal tissue (Tissue Disposal Mandate). These laws will eliminate and/or burden access to abortions in the State, discussed further below.

2. I further understand that Little Rock Family Planning Services (“LRFPS”), located in Little Rock, Arkansas, and Planned Parenthood of Arkansas and Eastern Oklahoma d/b/a

Planned Parenthood Great Plains (“PPAEO”) in Little Rock, Arkansas, are the only two abortion providers in the state.

3. It is my understanding that PPAEO provides medication abortion up to 10 weeks, as dated from the first day of a woman’s last menstrual period (“LMP”), at its Little Rock location, and that Plaintiff LRFPP provides both medication abortion (up to 10 weeks LMP) and procedural abortion (up to 21.6 weeks LMP), also in Little Rock. It is also my understanding that Plaintiff LRFPP is the sole abortion clinic in the state that offers procedural abortion care—in other words, the only abortion care available after 10 weeks LMP.

4. I also understand that Plaintiff LRFPP currently attempts fetal demise by injecting a drug called digoxin starting between 18-20 weeks, but because digoxin can take approximately 24 hours to work, such injections require a woman to make an additional trip to the clinic the day before completion of her abortion procedure. I understand that, currently, for all patients prior to 18 weeks and for many patients between 18-20 weeks, D&E procedures can be completed in one day. If the D&E Ban takes effect, that could require all patients who currently obtain a D&E in one-day to make an additional trip to the clinic, which will burden low-income women in Arkansas, including by delaying or even preventing them from obtaining abortions.

5. Further, I understand that digoxin is not always successful, but physicians are currently able to proceed with the abortion in such cases. If digoxin failed to cause demise after 24 hours and a second injection were required under the D&E Ban, a patient would be required to delay her procedure for still another day. This additional trip will likewise burden low-income women in Arkansas, including by preventing or delaying low-income women from obtaining abortions.

6. I further understand LRFPP instructs patients who currently undergo a two-day

procedure to remain within the Little Rock area and to return to the facility the next day. Thus, if the D&E Ban requires all D&E patients to undergo two- or even three-day procedures women who have traveled long distances to get to the facility will be required to be away from home overnight, maybe even longer, and will need to be away from work and/or family on consecutive days.

7. Furthermore, if abortion is effectively eliminated in Arkansas after 10 weeks LMP, people seeking abortions in the state would have to travel great distances and, in many cases, leave the state entirely to obtain such services, if they are even able to do so.

8. It is my understanding that if Plaintiff LRFP and its physicians and staff are forced to stop providing abortion care in Little Rock, the next closest provider for women in and around Little Rock seeking abortion after 10 weeks LMP is located in Memphis, Tennessee, which is approximately 300-miles round-trip from Little Rock. But the provider in Memphis only provides abortions up to 19.6 weeks LMP. If a patient needs care up to 21.6 weeks LMP, the closest providers are in Dallas, Texas (638-miles round-trip) and Granite City, Illinois (712-miles round-trip).

9. Through my research, which lies at the intersection of poverty, gender, and social policy, I am familiar with the barriers that affect the ability of poor and low-income women¹ to access health care services. It is my opinion that if the four laws that passed in 2017 take effect, the resulting increase in travel distance to access an abortion, and/or the additional trip(s) that would be required, would impose significant additional financial burdens and social-psychological stress on poor and low-income women who seek an abortion.

¹ Further, I am familiar with the research that also includes individuals who are poor or low-income and gender minorities (such as transgender and nonbinary individuals) and their access to abortions. Although I use women as the focus of this report, my opinions about the impact of the challenge laws apply to gender minorities as well.

10. Based on my extensive research into and familiarity with the difficulties poor and low-income women face in their daily lives, it is my opinion that enforcement would impose logistical and financial obstacles that harm these women in the following ways: preventing some women from being able to obtain an abortion; delaying other women's access to that care; jeopardizing women's confidentiality and/or employment; increasing the risk that victims of domestic violence will experience physical violence or other abuse; and putting women and their families at risk of deepening poverty, hunger, or eviction.

Professional Credentials and Experience

11. I am an expert in the field of sociology and specifically focused on poverty, women's economic status, and social policies at the state and federal level in the United States. I hold a Ph.D. and M.A. in sociology. I am currently an Assistant Professor of Sociology at the University of Houston, in Houston, Texas. For more than 15 years, I have conducted research and published on these topics in peer-reviewed sociology and poverty journals, and in a book published by Rutgers University Press in July 2019. My sociological research has included qualitative methods and data analysis regarding women's experiences of poverty, and my expertise includes the consequences and social policy determinants of women's poverty nationwide, as well as regional and geographical similarities and differences across the United States.

12. I have presented my research at numerous professional conferences and provided expert testimony on these issues to the United States Congress in 2005, 2006, and 2011. Prior to joining the faculty at the University of Houston, I was an Assistant Professor of Sociology at Sonoma State University, where I earned tenure in May 2014. In 2011, I was named an "Emerging Scholar" in poverty and welfare research by the U.S. Department of Health and

Human Services, and I have received national grants to support my work in this area from the National Poverty Center, the American Association of University Women, and the National Science Foundation. I serve on national research and poverty advisory committees, where I work with other scholars on these issues.

13. My *curriculum vitae*, which sets forth my experience and credentials in greater detail and contains a full list of my publications, is attached as Exhibit A to this report.

Methodology Used

14. Sociologists often triangulate information in order to describe a social phenomenon. Triangulation refers to the use of multiple methods, data sources, and existing sociological research to guide researchers to develop a comprehensive understanding of what they are studying.² Triangulation is one way of helping ensure that the research is valid; this is done by approaching a research question from multiple angles and then checking the consistency of one's findings. But it is also a way of ensuring that the research is robust and comprehensive. Sociologists, therefore, employ a wide array of research methods, including both qualitative and quantitative, and rely on both existing empirical data (and data sets) and collecting new data.³

15. Sociologists, like other social scientists, rely heavily on existing literature in a given area, the previous research that has been done on topics, and the use of existing data sets, such as publicly available data, like census data, or data that is made available through research consortiums. In addition to our reliance on available data and research, we also collect our own research data—which includes both qualitative and quantitative data. We use all the methods

² See, e.g., Nancy Carter et al., *The Use of Triangulation in Qualitative Research*, 41 ONCOLOGY NURSE FORUM 545, 545 (2014), <https://onf.ons.org/onf/41/5/use-triangulation-qualitative-research>.

³ For a robust discussion of methods, see UWE FLICK, AN INTRODUCTION TO QUALITATIVE RESEARCH (Sage Publications, 5th ed. 2014).

described to answer research questions. I follow the same model of triangulation in my own research: I answer research questions by relying on existing literature, analyzing existing data, and/or collecting new empirical data.⁴

16. My approach to analyzing the impact of the Laws on women in Arkansas followed a similar pattern. I explored the existing literature and the research in the area of abortion and abortion access both in the State and across the United States. More broadly, I also explored access to health and human services generally. I analyzed and pulled data from the census and from other data sources, such as the Center for Disease Control and Prevention (“CDC”). I compiled my data on Arkansas from the U.S. Census, the U.S. Department of Health and Human Services, the U.S. Department of Agriculture, the U.S. Department of Housing and Urban Development, the U.S. Department of Labor, the Economic Policy Institute, the Internal Revenue Service, and the U.S. General Services Administration, along with the other sources cited below. Because of my use of well-respected data from the federal government and from Arkansas itself, and because of my reliance on peer-reviewed research and studies, I am confident that my findings are accurate and unhindered.⁵

Poverty & Poor and Low-Income Women in Arkansas

17. The United States Department of Health and Human Services (“HHS”) defines the federal poverty guideline (“poverty line” or “poverty guideline”)⁶ as an income of under

⁴ See, e.g., Sheila Katz, *TANF’s 15th Anniversary: Are Low-Income Mothers Celebrating Upward Economic Mobility?*, 6 *SOCIOLOGY COMPASS* 657, 657–670 (2012) [hereinafter Katz, *TANF’s 15th Anniversary*].

⁵ While I did not collect original qualitative data from Arkansas women, I did rely on my own expertise and qualitative data from working with, and researching, low-income women.

⁶ The federal poverty guidelines are a federal poverty measure; they are issued each year in the Federal Register by HHS. The guidelines are a simplification of the poverty thresholds (another measure of federal poverty updated each year by the Census Bureau) for use for administrative purposes — for instance, determining financial eligibility for certain federal programs. The poverty threshold is used for statistical purposes to report how many people are poor

\$12,760 per year for a single person, with \$4,480 added per year for each additional member of the household.⁷ The federal government considers a person or family whose household income is below the poverty line to be “poor”.

18. According to 2019 Census Bureau data, Arkansas is the 5th poorest state in the United States, and borders two of the other poorest states: Mississippi (the poorest state in the U.S.) and Louisiana (the 2nd poorest).

19. Arkansas’s official poverty rate, reflecting the percentage of the population below the federal poverty threshold, was 17% statewide as of 2019.⁸ The poverty rate for women in the state is even higher, at 18.6%.⁹

20. Poverty disproportionately impacts women, especially households headed by single mothers, both in Arkansas and across the nation. Women are more likely than men to be poor, are more negatively impacted by recessions and other economic forces, and are more likely to have dependents that add to their economic responsibilities. Based on data from the American Community Survey, over a quarter million women (approximately 269,774) live below the poverty threshold in Arkansas.¹⁰ Of people below the poverty threshold in Arkansas, 56.8% are

each year. The poverty guideline and threshold are almost identical (within \$10), but HHS rounds to the nearest zero, and the Census Bureau uses an exact figure. I refer to the poverty level in places that relate to how to determine if someone is poor, and I use the threshold in places that report the census data on who was poor in previous years.

⁷ U.S. Federal Poverty Guidelines Used to Determine Financial Eligibility for Certain Federal Programs, U.S. Dep’t of Health & Human Servs., <https://aspe.hhs.gov/poverty-guidelines>, last accessed October 12, 2020.

⁸ Poverty Status in the Past 12 Months, 2019 American Community Survey 5-Year Estimates for Arkansas, U.S. Census Bureau, Table ID S1701, <https://data.census.gov/cedsci/all?q=S1702&t=Poverty&g=0400000US05>.

⁹ *Id.*

¹⁰ Poverty Status in the Past 12 Months, 2019 American Community Survey 1-Year Estimates for Arkansas, U.S. Census Bureau, Table ID S1701, <https://data.census.gov/cedsci/all?q=S1702&t=Poverty&g=0400000US05>.

women and 43.2% are men.¹¹

21. Poverty also disproportionately affects already marginalized communities, including people of color. Indeed, of those in poverty in Arkansas, 29.3% are Black or African American, 22.6% are American Indian or Alaska Native, and 25.6% are Hispanic or Latino.¹² Approximately 28,000 Black women of child-bearing age are below the poverty level in Arkansas.¹³ Additionally, 28.6% of Black women in Arkansas of childbearing age are poor as compared to 17% of white women of childbearing age.¹⁴ Therefore, poverty disproportionately affects Black women.

22. The federal poverty guideline, although widely used, is extensively considered an inadequate measure of poverty in the United States. The guideline is based on a formula from the 1960s that assumes that families spend approximately one-third of their budget on food, which is no longer the case amid rising costs for housing and transportation. The federal poverty guideline also does not take into account other significant costs most families incur, such as childcare, medical expenses, utilities, and taxes. Indeed, research shows that even families who are earning more than twice the federal poverty guideline (*i.e.*, 200% of the poverty guideline) have trouble making ends meet and paying for basic expenses.¹⁵

23. Accordingly, in addition to those who are considered “poor” (*i.e.*, below the poverty line), individuals and families between 100% and 200% of the federal poverty guideline

¹¹ *Id.*

¹² Poverty Status in the Past 12 Months, 2019 American Community Survey 5-Year Estimates for Arkansas, U.S. Census Bureau, Table ID S1701, <https://data.census.gov/cedsci/all?q=S1702&t=Poverty&g=0400000US05>.

¹³ Poverty Status in the Past 12 Months, 2019 American Community Survey 1-Year Estimates for Arkansas, U.S. Census Bureau, Table ID S1701, <https://data.census.gov/cedsci/all?q=S1702&t=Poverty&g=0400000US05>.

¹⁴ *Id.*

¹⁵ *See, e.g.*, Gregory Arcs & Pamela Loprest, Who are Low-Income Working Families?, Urban Inst. (2005), available at <https://www.urban.org/sites/default/files/publication/51726/311242-who-are-low-income-working-families-.pdf>.

are considered “low-income” by most poverty researchers. In fact, some federal, state, and local social programs also recognize that the federal poverty guideline is too low, and set eligibility requirements for public assistance at 125, 150, or 200 percent of the federal poverty guideline. For a family of three—*e.g.*, a single mother and two children—those amounts would be an income of \$27,150 (at 125%), \$32,580 (at 150%), and \$43,440 (at 200%) respectively.

24. In Arkansas, almost half (44.1%) of families headed by single mothers with dependent children are living at or below 125% of the federal poverty threshold, and over a third (35.4%) are living at less than 100% of the poverty threshold.¹⁶

25. Moreover, many poor individuals are part of the “working poor”—working at minimum wage and/or earning so little that they cannot meet basic needs for themselves or their family. The Bureau of Labor Statistics defines the “working poor [as] people who spent at least 27 weeks in the labor force (that is, working or looking for work) but whose incomes still fell below the official poverty level.”¹⁷

26. Women are more likely than men to be working poor, and among families with at least one member in the labor force for 27 weeks or more, families maintained by women were more than twice as likely as families maintained by men to be living below the poverty threshold (22% for female-headed households vs. 10.8% for male-headed households or 4.7% for married couple families).¹⁸ Indeed, a woman working full-time (40 hours a week) earning minimum wage in Arkansas now has annual earnings of approximately \$20,800, which is just above the

¹⁶ Selected Characteristics of People at Specified Levels of Poverty in the Past 12 Months, 2019 American Community Survey 5-Year Estimates, Arkansas, U.S. Census Bureau, American FactFinder, <https://data.census.gov/cedsci/table?t=Poverty&g=0400000US05&tid=ACSST5Y2019.S1703&hidePreview=false>

¹⁷ A Profile of the Working Poor, 2018, U.S. Dep’t of Labor, Bureau of Labor Statistics (July 2020), <https://www.bls.gov/opub/reports/working-poor/2018/pdf/home.pdf>

¹⁸ *Id.* Similarly, Black people and Hispanic and Latino people are more than twice as likely as white people and Asian people to be among the working poor. *Id.*

federal poverty threshold if she has one child in her household and below the poverty line if she has more children.¹⁹

27. The amount needed to maintain a minimally self-sufficient standard of living in Arkansas is almost twice the amount of the federal poverty guideline. For example, the fair market rent, as designated by the U.S. Department of Housing and Urban Development, is \$735 for a one-bedroom apartment and \$849 for a two-bedroom in Little Rock.²⁰ This means that a woman in Little Rock earning \$1,733 per month (her monthly income if she is working full-time, year-round, at Arkansas's minimum wage) would pay approximately 42% of her monthly income for a one-bedroom apartment, and approximately 49% of her monthly income for a two-bedroom apartment. Similarly, in Fayetteville, the fair market rent is \$618 for a one-bedroom apartment and \$780 for a two-bedroom.²¹ Accordingly, a woman in Fayetteville earning \$1,733 per month would pay approximately 36% of her monthly income for a one-bedroom apartment, and approximately 45% of her monthly income for a two-bedroom apartment. As HUD explains, "Families who pay more than 30 percent of their income for housing are considered cost burdened and may have difficulty affording necessities such as food, clothing, transportation and medical care. An estimated 12 million renter and homeowner households now pay more than 50 percent of their annual incomes for housing. A family with one full-time worker earning the

¹⁹ This number reflects Arkansas's recent increase of its minimum wage from \$8.50 to \$9.25 an hour in January 2019, and to \$10 in January 2020. See An \$11 Minimum Wage for All Arkansans: Raising the Quality of Life for 300,000 Workers in All 75 Arkansas Counties, National Employment Law Project, October 2018, <https://www.nelp.org/publication/11-minimum-wage-arkansans-raising-quality-life-300000-workers-75-arkansas-counties/>. Prior to the recent change, a woman would be making approximately \$3,120 a year less.

²⁰ Fair Market Rent (FMR) FY 2021 and Income Limit (IL) FY 2021 Summary System – Select Geography, U.S. Dep't of Housing & Urban Dev., FY 2021 Little Rock-North Little Rock-Conway, AR HUD Metro FMR Area, available at https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2021_code/2021summary.odn.

²¹ Fair Market Rent (FMR) FY 2021 and Income Limit (IL) FY 2021 Summary System – Select Geography, U.S. Dep't of Housing & Urban Dev., FY 2021 Fayetteville-Springdale-Rogers, AR HUD Metro FMR, available at https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2021_code/2021summary.odn.

minimum wage cannot afford the local fair-market rent for a two bedroom apartment anywhere in the United States.”²²

28. To understand poverty and how it impacts women’s lives in Arkansas, it is also important to consider the subset of individuals who live in “deep poverty”, characterized by those that study the issue as individuals or households that live at or below 50% of the poverty line.²³ These households tend to be clustered together in pockets of deep poverty, whether in the inner city or in a rural county. While deep poverty is decreasing internationally, deep poverty in the United States, and specifically in southern states, is, troublingly, on the rise.²⁴ According to American Community Survey statistics, 7% of Arkansans live in deep poverty.²⁵ Like poverty, “deep poverty” disproportionately impacts women. In Arkansas, 16.6% of families headed by single mothers are living in deep poverty.²⁶ As will be discussed below, day-to-day life is extremely challenging for people in such dire financial straits. Finally, deep poverty affects families of color more than white families. In Arkansas, the rate of deep poverty is 5.6% for people who identify as white compared to 13.4% for people who identify as Black or African-

²² Affordable Housing, U.S. DEP’T OF HOUSING & URBAN DEV. (Dec 17, 2019), https://www.hud.gov/program_offices/comm_planning/affordablehousing/.

²³ Serena Lei, The Unwaged War on Deep Poverty, Urban Inst. (Feb. 23, 2015) <http://www.urban.org/features/unwaged-war-deep-poverty>; *see also* Kathryn J. Edin & H. Luke Shaefer, \$2.00 A Day: Living On Almost Nothing in America (2016).

²⁴ *See* United Nations Human Rights Office of the High Commissioner, Statement on Visit to the USA, by Professor Philip Alston, United Nations Special Rapporteur on extreme poverty and human rights, (December 15, 2017), <http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=22533&LangID=E> (noting that 18.5 million Americans are living in deep poverty with incomes below half of the poverty threshold).

²⁵ Selected Characteristics of People at Specified Levels of Poverty in the Past 12 Months, 2019 American Community Survey 5-Year Estimates, Arkansas, U.S. Census Bureau, American FactFinder, <https://data.census.gov/cedsci/table?t=Poverty&g=0400000US05&tid=ACSST5Y2019.S1703&hidePreview=false>

²⁶ *Id.*

American.²⁷ As discussed below, day-to-day life is extremely challenging for people in such dire financial straits. Families in deep poverty are unable to meet even the most basic of basic needs. These families lack access to health care, adequate housing, basic transportation, adequate food and water, and consistent utilities.

29. In addition, out of the 75 counties in Arkansas, 17 counties suffer from “persistent poverty.”²⁸ A county in persistent poverty is defined as a county where the poverty rate has been at or above 20% for the past 30 years.²⁹ Further, 39 counties in Arkansas have persistent child poverty (children’s poverty that is above 20% for the last 30 years), and 48 counties in Arkansas have been identified by the U.S. Department of Agriculture (“USDA”) as being at risk of persistent poverty.³⁰

30. Arkansas women living in deep or persistent poverty face the greatest logistical, financial, and psychological hurdles when accessing health care services, because they are the least likely to have adequate transportation, childcare, and financial resources and/or support.

Poverty and Unintended Pregnancy

31. Research demonstrates that women who seek abortion care in the United States are disproportionately poor and low-income, which is consistent with the significantly higher rate of unintended pregnancy among women below 100% of the poverty level—who have less

²⁷ *Id.*

²⁸ These counties are: Bradley, Chicot, Columbia, Crittenden, Desha, Jefferson, Lafayette, Lee, Mississippi, Monroe, Nevada, Newton, Phillips, Poinsett, St. Francis, Searcy, and Woodruff. ERS County Typology Codes, 2015 Edition: Persistent Poverty and Persistent Child Poverty Counties, U.S. Dep’t of Agric., Econ. Research Serv., last updated May 31, 2017, available via <https://www.ers.usda.gov/data-products/county-typology-codes/>.

²⁹ Rural Poverty and Well-being, U.S. Dep’t of Agric., Econ. Research Serv., <https://www.ers.usda.gov/topics/rural-economy-population/rural-poverty-well-being/>.

³⁰ ERS County Typology Codes, 2015 Edition: Persistent Poverty and Persistent Child Poverty Counties, U.S. Dep’t of Agric., Econ. Research Serv., last updated May 31, 2017, available via <https://www.ers.usda.gov/data-products/county-typology-codes/>.

access to health care services and contraception—as compared to women above 200% of the poverty line.³¹ In 2014, 49% of women having abortions in the United States as a whole had incomes below 100% of the federal poverty level, and another 26% had incomes below 200% of the federal poverty level.³² Thus, approximately 75% of women seeking abortions in the United States were either poor or low-income. In addition, according to recent statistics, two-thirds of women who obtain abortions in Arkansas already have at least one child.³³ In other words, among women seeking abortions in Arkansas, an overwhelming percentage are poor and low-income single mothers. Further, women of color are disproportionately abortion patients. Nationally and in Arkansas, Black women are overrepresented; almost half of abortion patients are Black.³⁴

Impact of the Four 2017 Laws on Affected Women

32. If the four laws passed in 2017 take effect, people seeking abortion will be burdened by being forced to travel out of state for abortion care and/or make additional trips to the clinic.

33. I am familiar with the literature analyzing the effect of increased travel on women's ability to obtain abortions. This research shows that increasing the distance that women

³¹ Lawrence B. Finer & Mia R. Zolna, Unintended Pregnancy in the United States: Incidence and Disparities, 2006, 84(5) *Contraception* 478 (2011).

³² Jenna Jerman et al., Guttmacher Inst., Characteristics of U.S. Abortion Patients in 2014 and Changes since 2008 (2016), available at <https://www.guttmacher.org/report/characteristics-us-abortion-patients-2014>.

³³ Tara C. Jatlaoui et. al., Ctrs. for Disease Control and Prevention, Abortion Surveillance—United States 2016, 68 *MMWR Surveill. Summ.* 1, at Table 16 (2018) <https://www.cdc.gov/mmwr/volumes/68/ss/ss6811a1.htm> (last accessed October 23, 2020) (65.1% of women in Arkansas who obtained abortions have previously had one or more live births).

³⁴ Rachel K. Jones & Jenna Jerman, Population Group Abortion Rates and Lifetime Incidence of Abortion: United States, 2008-2014, *American Journal of Public Health*, *American Journal of Public Health* 107, 1904_1909, <https://doi.org/10.2105/AJPH.2017.304042> and Center of Health Statistics, Arkansas Department of Health, Induced Abortion Report, June 1, 2020, https://www.healthy.arkansas.gov/images/uploads/pdf/Induced_Abortion_final_2019.pdf

must travel to access abortion services presents significant logistical and financial hurdles, including arranging and paying for transportation, childcare, and time off from work or other obligations.

34. This is entirely consistent with my research and that of other poverty scholars regarding the day-to-day lives of poor and low-income women across the country, including the challenges they face in arranging for unexpected (and, as with abortion, time-sensitive) travel and costs.

35. For people forced to travel out-of-state, the next-closest provider is in Memphis, Tennessee, an approximately 300-mile round-trip journey, or Dallas, Texas (approximately 600-miles round-trip) or Granite City, Illinois (approximately 700-miles round-trip).³⁵

36. For poor and low-income women, the out-of-state travel or the intrastate travel to make an additional trip to the clinic, would delay numerous women in seeking an abortion and prevent others from being able to obtain an abortion altogether. In some cases, the additional time, expense and lost income from this added travel could restrict women's ability to buy food or other necessities; jeopardize their employment; jeopardize the confidentiality of their pregnancy and abortion decision, including from employers and from abusive partners or former partners; and/or impose other significant burdens.

Transportation and Lodging

37. Traveling out of state, or intrastate, to access needed services—in this case, an abortion—imposes costs related to transportation and lodging that present serious obstacles to poor and low-income women. Intercity travel that many middle-income people would not think twice about undertaking is a very different prospect for many poor and low-income women,

³⁵ Distance calculated using Google maps.

given the stark disparity in resources.

38. Three-quarters of women seeking abortions already struggle to meet their basic needs including housing, food, and transportation.³⁶ Travel to seek abortion services exacerbates their hardships.³⁷ Low-income women are more likely to use public transportation as their primary source of transportation.³⁸ Indeed, the increasing need for transportation to access medical services has recently been recognized as a major challenge facing states by the National Conference of State Legislatures.³⁹ In the research, lack of income is cited as a main factor as to why people struggle to find transportation to attend medical appointments.

39. Take the example of women in and around Little Rock who can presently obtain procedural abortion after 10 weeks LMP without substantial travel. The next-closest provider of post-10-week procedural abortions is in Memphis, Tennessee. For those who do not own or have access to vehicles, the only significant intercity transportation between Little Rock and Memphis (besides flying) is a private bus service, such as Greyhound. A single round-trip Greyhound bus ticket between Little Rock and Memphis costs between \$30 and \$72.⁴⁰

40. In addition, poor and low-income women often wait later in pregnancy to have the procedure because they find out later they are pregnant and/or need time to raise the funds to

³⁶ Foster, Diana Greene, *The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having –or Being Denied –an Abortion*, Scribner, 2020.

³⁷ Diana Greene Foster, PhD, M. Antonia Biggs, Lauren Ralph, Caitlin Gerdt, Sarah Roberts, and M. Maria Glymour, “Socioeconomic Outcomes of Women Who Receive and Women Who Are Denied Wanted Abortions in the United States” (*American Journal of Public Health*, 2018 March; 108(3): 407–413). See also Foster, Diana Greene, *The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having –or Being Denied –an Abortion*, Scribner, 2020.

³⁸ *A Profile of Public Transportation Passenger Demographics and Travel Characteristics Reported in On-Board Surveys*, AM. PUBLIC TRANSPORTATION ASS’N (May 2007), <https://rosap.ntl.bts.gov/view/dot/6296> [hereinafter *A Profile of Public Transportation*].

³⁹ Nat’l Conf. of St. Legislatures, *Non-Emergency Medical Transportation: A Vital Lifeline for a Healthy Community* (2015), <http://www.ncsl.org/research/transportation/non-emergency-medical-transportation-a-vital-lifeline-for-a-healthy-community.aspx>.

⁴⁰ Approximate costs calculated using Greyhound website, available at <http://www.greyhound.com>.

travel for the procedure.⁴¹ Given this, women may have to travel to Dallas, TX or Granite City, IL to access later procedures. The longer roundtrip travel and the time for the later procedure could push time away from home to three, four, or five days (depending upon clinic procedure time, driving time, or bus schedules). The length of travel, the added time away from home, and the later procedure expenses increases the cost for women dramatically—doubling or tripling the cost.

41. In my experience, poor and low-income women faced with unexpected travel often need to delay it while they try to raise funds and make other arrangements—which, in this case, means delaying time-sensitive medical care. In order to raise the necessary funds, these women must make painful sacrifices, which may include forgoing food or other basic necessities.

42. Although to middle-class people the extra cost of gas or a round-trip bus ticket may seem small or insignificant, for a woman living at or near the federal poverty guideline, any additional expense can put her at risk of missing a utility or rent payment (and subsequent eviction), not having enough food to put on the table, or being unable to afford other basic necessities as she has absolutely no disposable income. For example, I recall interviewing a woman who lived without running water in her apartment for over year because she had missed one payment totaling less than \$50. After missing the payment, the water company applied a late fee on top of the next month's water bill, and gave her a cut-off notice; when she didn't pay it, they shut off her water. It took her over a year to save up enough money to pay the original missed payment and resultant late fees, as well as the disconnect and reconnect fees, and a required "security deposit" because she was now considered a "high-risk" customer. The missed \$50 payment ended up costing her well over \$400. Not only will every additional expense

⁴¹ Foster, Diana Greene, *The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having –or Being Denied –an Abortion*, Scribner, 2020.

potentially put a low-income woman over the edge financially, but her knowledge of the possibility of this happening often imposes such an obstacle that she is unable to get the desired care.

43. Moreover, I understand that many abortion providers require that someone accompany the woman home from a procedural abortion when a sedative is used during the procedure; therefore, this cost can actually be double, or the cost of two round-trip bus tickets. And a woman may also need to pay for the cost of taxi or bus fares to the bus station in Little Rock, and between the bus station and the abortion clinic in Memphis. One web site visited on October 23, 2020, listed hotel rooms in Memphis starting around \$50 a night with taxes, but most were in the range of \$60-75 per night.⁴² For poor and low-income women earning the minimum wage of \$10 an hour in Arkansas, the cost of an overnight hotel stay, even at the lowest rates available in Memphis, may amount to almost an entire extra day of work (8 hours).

44. If a poor or low-income woman instead owns a car, she may try to drive the distance to a different city to seek an abortion. However, many poor and low-income women in Arkansas likely do not own or have access to cars that are reliable enough to make a trip of the length required. At a national level, as of 1995, a quarter of low-income families, and a third of low-income families headed by single parents, were without a private car, versus only 4% of other families.⁴³ And in those low-income households that have cars, these cars are more likely to be shared among adults.⁴⁴ In addition, most cars that low-income families owned were an

⁴² See <http://www.kayak.com/Hotels> (last visited October 23, 2020).

⁴³ Elaine Murakami and Jennifer Young, Daily Travel by Persons with Low Income (National Personal Transportation Survey Symposium Presentation, Oct. 26, 1997), available at <http://nhts.ornl.gov/1995/Doc/lowinc.pdf>.

⁴⁴ *Id.*

average of ten years old.⁴⁵ Many low-income car owners do not have a car that is reliable enough for intercity trips. The car's age or mechanical condition may make it unlikely to be safe to drive longer distances. Therefore, many poor and low-income women who are in households that have a car may have to travel by private bus service either because the car is shared and not available for their use, or because the car is unreliable and not safe to drive outside the immediate home area. Further, poor and low-income women's support networks are usually made up of people from a similar socioeconomic status. As a result, poor and low-income women's support networks are often comprised of other people who are unable to lend them vehicles or money to overcome these logistical obstacles.

45. Women who live in Arkansas but do not live in the Little Rock area will also experience burdens if they are forced to make an additional trip or multiple trips to the clinic. Intrastate travel in Arkansas still presents significant burdens for low-income women. Highways in Arkansas are rated in the bottom third of quality of highways nationally.⁴⁶ Within Arkansas, a few other transportation options do exist, for example renting a car, traveling by train, or relying on regional transit. However, there are many barriers to using these other modes of transportation such as the ability to rent a car, the lack of train stations, and the insufficient synchronization between the regional transit systems. Therefore, given the time, cost, or additional logistical coordination needed, it seems unlikely these other options are widely utilized by low-income women. Buses such as Greyhound are an option, but because there may be only one trip per day, a woman traveling by bus would be unable to make the journey to the clinic and back in a single day. She would be forced to spend at least one night in a Little Rock

⁴⁵ *Id.*

⁴⁶ <https://reason.org/policy-study/24th-annual-highway-report/arkansas/>

hotel, making this an inaccessible and unaffordable method of travel for a poor or low-income woman.

46. Those women who can get access to a car to drive would still have to pay for gas. The gas cost for round-trip car travel between Little Rock and Memphis is approximately \$18, and the gas cost for round-trip car travel between Fayetteville and Tulsa is approximately \$15.⁴⁷ Although \$15-20 may not seem like a lot of money to middle or upper-income people, for poor and low-income women, it is. To put it into context, it is almost 2 extra hours of work, or a large part of her food budget for the week, or her water bill for the month. In other words, this is money that a poor or low-income woman may have already earmarked in her carefully balanced monthly budget for basic necessities.

Time Away From Work

47. Low-wage workers often have no access to paid time off or sick days; according to the Institute for Women's Policy Research, 41% of working parents at or below 200% of the poverty line have no access to paid sick leave, vacation days, personal days, or any other form of compensated leave.⁴⁸

48. Even seeking uncompensated time off can be a struggle for low-wage workers, who often have less autonomy in setting their work schedules. Low-wage workers also often work unpredictable, varied, or second shift (evening shift) jobs, such as those in the food or service industry. Accordingly, many women may find it extremely difficult, if not impossible, to adapt their schedules in order to make even evening appointments. Moreover, because so much

⁴⁷ The price per mile of gas cost was calculated using the average gas mileage for a 2010 model year small/mid-size American sedan. See Daily Fuel Gauge Report: Fuel Cost Calculator, Am. Auto. Ass'n (AAA), <http://gasprices.aaa.com/aaa-gas-cost-calculator/>.

⁴⁸ Andrea Lindemann Gilliam, Institute for Women's Policy Research, An Introduction to Paid Time Off Banks, (June 20, 2012), <https://femchat-iwpr.org/2012/06/20/an-introduction-to-paid-time-off-banks/>

low-wage work is considered unskilled, workers can be replaced easily and may face termination if they insist on taking time off on a particular day. Also, many employers require workers to disclose the reason why they are taking time off, especially for more than one day in a row. The additional time off required by travel may make it difficult for a poor or low-income woman to keep her abortion confidential from her supervisor or other employees.

49. While seeking an abortion in town may not require missing any work or only one day, in order to travel intrastate or to an out-of-state clinic—and to do so twice or for a multiple-day stay⁴⁹—women will miss significantly more work. For example, a woman traveling from Little Rock to Memphis is likely to miss considerable time from work given bus schedules, travel time to the clinic, counseling time, procedure time, and travel time home.

50. The same is true for women traveling from other parts of Arkansas to Little Rock who will be forced to make multiple trips to the clinic, or stay for additional days/nights in Little Rock.

51. If a poor or low-income woman is able to get time off, she is likely to forego wages, in addition to paying for transportation and lodging. At the minimum wage in Arkansas of \$10, foregoing two eight-hour shifts to travel to and attend abortion counseling and procedure appointments would result in \$160 in lost wages. This is almost 10% of a woman's monthly income. Of course, the expense of lost wages is on top of the cost of the abortion and the additional travel costs. Poor and low-income women already have trouble or are fully unable to make ends meet each month; however, with additional lost wages or extra expenses, they will be unable to pay for vital everyday expenses such as food, rent, or utilities.

⁴⁹ In addition to mandatory delays that require two trips over two or more days, I understand that some procedural abortions may require visits over 2-3 days.

Time Away From Home

52. As noted above, over two-thirds of women who obtain abortions in Arkansas have had at least one child.⁵⁰ For such a poor or low-income woman, then, an intrastate trip or out-of-town trip to seek an abortion will require her to pay either the cost of one or more additional round-trip bus tickets for her children, if she must bring them to the appointment, or the cost of childcare for the entire time she is out of town. Round-the-clock childcare is quite expensive and hard to find. Women who are able to may instead leave their children in the care of a trusted family member or friend. This still often incurs additional costs to meet the child's needs outside of the home, as that caretaker is likely low-income herself and will need some payment to cover food and other costs for the children. Moreover, having to rely on a family member or friend for childcare in order to travel, in some cases twice (or for multiple nights), for the abortion could require that a woman disclose why she is traveling, making it difficult for a poor or low-income woman to keep her abortion confidential.

53. Often, however, poor and low-income women do not have family members or friends who are able to care for their children or whom they can entrust with their children.⁵¹ Low-income mothers cite problems finding, affording, or trusting childcare providers as one of the primary obstacles in their lives.⁵² They experience childcare difficulties when seeking work, attending higher education programs, attending meetings with social service agencies, or going

⁵⁰ Tara C. Jatlaoui et. al., Ctrs. for Disease Control and Prevention, Abortion Surveillance—United States 2015, 67 *MMWR Surveill. Summ.* 1, at Table 16 (2018) https://www.cdc.gov/mmwr/volumes/67/ss/ss6713a1.htm#T16_down (last accessed May 24, 2019) (66.8% of women in Arkansas who obtained abortions have previously had one or more live births).

⁵¹ Judith Levine, *Ain't No Trust: How Bosses, Boyfriends, and Bureaucrats Fail Low-Income Mothers and Why It Matters* (2013).

⁵² *Id.*

to medical appointments.⁵³ Childcare for events or meetings that are outside regularly scheduled childcare hours, such as one-time trips out of town, and for the evenings, weekends, or overnight, is especially expensive, very hard to find, and often of a lower quality than regular child care. Indeed, many communities, especially those in rural areas, often do not have *any* after hours or overnight childcare options available.

54. Travel also increases other, collateral, costs. Daily living costs, such as food, increase while traveling. Cooking or preparing meals in your own home is less expensive than eating while traveling.⁵⁴

55. For example, the total additional financial burden that a woman in or around Little Rock would have to incur to obtain a procedural abortion if she were forced to travel to Memphis would be a significant amount of her monthly income, and she would incur lost wages due to the time she would have to miss work. As a result of these unforeseen costs, she would likely be unable to meet her necessary expenses that month, including rent, utilities, food, and other expenses like transportation and child care.

56. I also understand that the cost of an abortion procedure increases as the pregnancy advances. This can create a vicious cycle: women's abortions are delayed because they need to raise additional funds; the delay means that the procedure is more expensive; women must then delay again to raise more money to pay for the more expensive procedure; and so on. Poverty itself is a vicious cycle; poor and low-income women, even when they are making

⁵³ *Id.*

⁵⁴ This is shown by the different ways the federal government treats food costs. See *Lodging by Month, Fiscal Year 2020 Per Diem Rates for Arkansas*, U.S. GEN. SERVICES ADMIN., ([HTTPS://WWW.GSA.GOV/TRAVEL/PLAN-BOOK/PER-DIEM-RATES/PER-DIEM-RATES-LOOKUP/?ACTION=PERDIEMS_REPORT&STATE=AR&FISCAL_YEAR=2021&ZIP=&CITY=](https://www.gsa.gov/travel/plan-book/per-diem-rates/per-diem-rates-lookup/?action=perdiems_report&state=AR&fiscal_year=2021&zip=&city=)); see also U.S. DEP'T OF AGRICULTURE, *Official USDA Food Plans*, (<https://www.fns.usda.gov/cnpp/usda-food-plans-cost-food-reports-monthly-reports>).

ends meets, are just one small emergency away from a major financial crisis that results in eviction, hunger, or escalating medical problems. These seemingly “minor” expenses or small emergencies can alter poor or low-income women’s ability to meet their basic needs for months and years to come and, accordingly, to create and maintain a safe lifestyle for themselves and their families (*e.g.*, by providing safe housing, food, water, heating, electricity, etc.).⁵⁵

57. All of these monetary costs and logistical difficulties may not fully reflect how daunting out-of-state travel may be for a poor or low-income woman who has lived all of her life in one area of Arkansas. Without access to discretionary funds for travel, she may never have traveled outside the metropolitan or rural area where she lives, and may spend the vast majority of her day-to-day life in a single area or neighborhood. Even if she is able to gather the money required to make the trip, the social-psychological hurdles of making multiple trips to an unfamiliar city, where she may know no one, may impede her.

58. This is also true for people who are forced to travel to Little Rock from other parts of the state that are not in the Little Rock area. Many of the women I have spoken with in my research have told me that if a particular service—medical, social, employment-related, or educational, and whether for them or their children—is not available within their town or within a reasonable distance, that service might as well not exist. Distances that middle- or upper-class people would think of as “reasonable” can still put a service out of reach for lower income women. I have found this social-psychological hurdle to be as significant a burden as the additional costs represented by travel, and it delays or prevents some poor or low-income women from traveling to obtain even much-needed services.

59. I have worked extensively with poor and low-income women for over fifteen

⁵⁵ Foster, Diana Greene, *The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having –or Being Denied –an Abortion*, Scribner, 2020.

years and I find them to be as bright, capable, and resourceful as any other population. My opinions are not intended to suggest otherwise. But the ability to navigate travel to what is likely to be an unfamiliar city, and to make all of the necessary arrangements either for multiple visits or for a multi-night stay, may not be part of poor and low-income women's lived experiences. All too often, the discretionary income and resources that enable such travel are significantly less likely to be part of their day-to-day lives.

60. Furthermore, given the economic, health, and travel circumstances around the COVID-19 pandemic, travel for low-income women to access an abortion becomes even more daunting and out of reach. Unemployment rates nationally and in Arkansas skyrocketed in late March and early April of 2020 and continues to remain high into late 2020.⁵⁶ Low-income families, especially those headed by single mothers, are disproportionately affected by the increase in unemployment or risk their health doing their jobs, since they work in the sectors that are most affected by the pandemic—such as healthcare, service industry, or personal/household services.⁵⁷ Across the country, but particularly in the south, families are deeply feeling the economic effects of the pandemic. In *The Turnaway Study*, Foster finds that three-quarters of participants reported not having enough money to meet their basic needs.⁵⁸ Given the sudden nature of the economic crisis due to COVID-19, an overwhelming majority of women seeking an abortion are likely to be experiencing even deeper financial struggle. Women, especially women

⁵⁶ U.S Department of Labor, Bureau of Labor Statistics, (<https://www.bls.gov/regions/southwest/data/xg-tables/ro6xg02.htm>).

⁵⁷ Matthew Dey, Mark A. Lowenstein, David S. Piccone Jr., and Anne E. Polivka, U.S Department of Labor, Bureau of Labor Statistics, “Update on Demographics, Earnings, and Family Characteristics of Workers in Sectors Initially Affected by COVID-19 Shutdowns” (<https://www.bls.gov/ers/update-on-demographics-earnings-and-family-characteristics-of-workers-in-sectors-initially-affected-by-covid-19-shutdowns.htm>).

⁵⁸ Foster, Diana Greene, *The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having –or Being Denied –an Abortion*, Scribner, 2020.

of color, are disproportionately affected by pandemic job losses.⁵⁹ Moreover, women are four times more likely than men to be dropping out of the labor force to care for and educate children.⁶⁰

Strategies to Raise Funds for Unexpected Travel

61. I know from my own research and from my review of the extensive literature on the subject that poor and low-income women struggle to come up with money in emergency situations. A recent report by the Board of Governors of the Federal Reserve System found that nationally “many adults are financially vulnerable and would have difficulty handling an emergency expense as small as \$400.”⁶¹ Further, “seventeen percent of adults are not able to pay all of their current month’s bills in full. Another 12 percent of adults would be unable to pay their current month’s bills if they also had an unexpected \$400 expense that they had to pay.”⁶² Although some with higher incomes and access to credit report that they might be able to borrow some of the money from friends and family or use a credit card, twenty-seven percent do not have a credit card, and “twelve percent of adults would be unable to pay the expense by any means.”⁶³ Finally, the report finds that “one-fourth of adults skipped necessary medical care in 2018 because they were unable to afford the cost.”⁶⁴ This report is on a national level; however,

⁵⁹ Claire Ewing-Nelson, National Women’s Law Center, “Four times more women than men dropped out of the labor force in September” October 2020 (<https://nwlc.org/wp-content/uploads/2020/10/september-jobs-fs1.pdf>).

⁶⁰ *Id.*

⁶¹ Board of Governors of the Federal Reserve System, “Report on the Economic Well-Being of U.S. Households 2018.” 2018. <https://www.federalreserve.gov/publications/files/2018-report-economic-well-being-us-households-201905.pdf>.

⁶² *Id.*

⁶³ *Id.*

⁶⁴ *Id.*

with the much higher rates of poverty in Arkansas (the fifth poorest state), I would expect these percentages to be even higher.

62. Poor and low-income women attempt to meet unexpected expenses in three primary ways. First, they make sacrifices in other areas, usually by not paying rent or utilities, drastically reducing their food budgets, or foregoing needed medical care.⁶⁵ This jeopardizes women's health, safety, and well-being, or their housing situation, as well as that of their children and families. Indeed, housing for most poor and low-income women is tenuous at best; one late rent payment can get a poor or low-income woman evicted. Eviction or being at risk for eviction is a downward slide for most poor and low-income families. Once they are at risk of eviction or have been evicted, the economic situation of the family can remain precarious for many years. The housing families find after an eviction is typically of lower quality, more expensive, in worse shape, or more dangerous than before the eviction.⁶⁶

63. A second strategy that women use is to borrow money through payday loans or other predatory lending practices, incurring high interest rates and fees that compound the initial expense and push them even deeper into debt.⁶⁷

64. The third strategy can be even more dangerous. Women may borrow the money they need from a boyfriend or partner, even if they are no longer together or even if he was abusive. Given the high rate of domestic violence among poor and low-income women, this strategy can be incredibly dangerous.⁶⁸ In my own interviews with poor and low-income women,

⁶⁵ See Mark R. Rank, *One Nation, Underprivileged: Why American Poverty Affects Us All*. (1st ed. 2004).

⁶⁶ See Kathryn J. Edin & H. Luke Shaefer, *\$2.00 a Day: Living on Almost Nothing in America* (2016).

⁶⁷ See, e.g., Matthew Desmond, *Evicted: Poverty and Profit in the American City* (2016).

⁶⁸ See Martha Davis, *The Economics of Abuse: How Violence Perpetuates Women's Poverty*, pp 17-30 in *Battered Women, Children, and Welfare Reform: The Ties That Bind* (Ruth Brandwein ed., 1999).

including women who are victims of domestic violence, they talk about the economic necessity of relying on or returning to an abusive ex-boyfriend to help make ends meet when faced with an unexpected crisis. Women have shared with me the difficulties and struggles that they confront as they weigh whether or not they can tolerate the abuse in order to alleviate a financial crisis such as avoiding eviction, paying for a cut-off utility, or getting necessary child care. I recall interviewing in connection with my research a mother in her late 20s who talked about the need to make ends meet by any means necessary. She was a single mother and domestic violence survivor, and she did not want to ask her abusive ex-boyfriend for money because she wanted to sever ties with him. She told me that she had contemplated stripping or prostitution in order to provide for herself and her daughter. She was not trying to stigmatize sex work; she was just uncomfortable with that strategy to make money.

65. And women with abusive ex-partners who end up being unable to obtain an abortion due to financial hardship may suffer particular devastating consequences. According to recent research, policies that restrict abortion access result in women being at a greater risk for domestic violence because they are “unable to terminate unwanted pregnancies, potentially keeping some women in physically violent relationships, and putting women and their children at increased risk of violence and other negative health consequences.”⁶⁹

Research on the Impact of Travel Burdens on Abortion Access

66. I am familiar with the literature analyzing the effect of increased travel on women’s ability to obtain abortions. This research confirms that increasing the distance and time that women must travel to access abortion services prevents some women from obtaining

⁶⁹ Sarah C.M. Roberts et al., *Risk of Violence From the Man Involved in the Pregnancy After Receiving or Being Denied an Abortion*, 12 BMC Med. 144 (2014).

abortions that they would have otherwise obtained; delays some women's abortion access; increases social-psychological stress; decreases their confidentiality about the procedure; and increases the likelihood that they feel stigmatized by their employer or social network (such as family or friends).

67. For instance, the "Turnaway Study" is a 5-year longitudinal prospective study of women who received an abortion and those who were unable to obtain one because they presented for care later in pregnancy than the clinic provided care. This study found that the most common reason women were delayed in accessing abortion care was because of travel and procedure costs (36.5% for first trimester abortions and 58.3% for women turned away because they had advanced past the point in pregnancy at which the clinic stopped providing care). The study also cited that the women reported that, in addition to the cost of travel and the procedure, they experienced delay as a result of having to get time off work, and find childcare, and not having anyone to travel with them.⁷⁰

68. In another study of abortion patients at 11 large providers, Finer *et al.* found that 58% of women would have liked to get their abortion earlier. "[T]he most common reasons for delay were that it took a long time to make arrangements," and poverty made women twice as likely to be delayed in making the arrangements to seek an abortion as non-poor women. The study found that distance from the abortion provider negatively affects women's ability to access abortion services—mainly because of the travel logistics and their lack of knowledge or familiarity with services in other cities.⁷¹ Other studies have similarly documented that decreased

⁷⁰ Upadhyay, Ushma D., et al., *Denial of abortion because of provider gestational age limits in the United States*, American Journal of Public Health 104.9 (2014): 1687-1694.

⁷¹ Lawrence B. Finer et al., *Timing of Steps and Reasons for Delays in Obtaining Abortions in the United States*, 74 Contraception 334 (2006).

availability of abortion services leads to delays in abortion access.⁷²

69. Research on this issue has been consistent since abortion became legal. In one of the first studies on this issue, Shelton *et al.* analyzed Georgia abortion rates and concluded that “the farther a woman has to travel to obtain an abortion, the less likely she is to obtain one.”⁷³ The Shelton study examined abortion rates in counties outside Atlanta (where all of the major abortion providers were located at that time) and found that there was a decline of 6.7 abortions per 1,000 live births for every ten miles of distance from Atlanta a woman lived. Other studies have reached comparable conclusions.⁷⁴

70. Moreover, in a recent study of Texas women seeking an abortion after the implementation of a law restricting abortion access, women reported that having to travel to unfamiliar cities, and overcome the logistical hurdles of that travel, imposed additional stress.⁷⁵ The study likewise documented that women were worried that they would suffer stigma if they utilized their social networks to attempt to overcome the barriers of traveling long distances to seek an abortion.

Conclusion

71. Women seeking abortion care must contend with the costs of travel, childcare, lodging, lost wages, and other ancillary expenses discussed above, in addition to the cost of the procedure itself. By forcing women to travel hundreds of miles to obtain an abortion, or make

⁷² Grossman D. *The Use of Public Health Evidence in Whole Woman’s Health v Hellerstedt*, JAMA Intern Med. 2017;177(2):155–156.

⁷³ James D. Shelton, Edward A. Brann & Kenneth F. Schulz, *Abortion Utilization: Does Travel Distance Matter?*, 8 Fam. Plan. Persp. 260 (1976).

⁷⁴ See, e.g., Sharon A. Dobie et al., *Abortion Services in Rural Washington State, 1983-1984 to 1993-1994: Availability and Outcomes*, 31 Fam. Plan. Persp. 241 (1999).

⁷⁵ Baum, White, Hopkins, Potter, and Grossman, *Women’s Experiences Obtaining Abortion Care in Texas after the Implementation of Restrictive Abortion Laws: A Qualitative Study*, 11 PLoS ONE 1 (2016).

multiple trips to the clinic, the 2017 abortion restrictions will greatly exacerbate the financial struggles a poor or low-income woman will face to access care. And because a large proportion of abortion patients are poor or low income, these laws will result in a significant number of Arkansas women facing the challenges explained above.

72. For a woman who earns just \$1,733 a month before paying for necessities like rent, utilities, and food, the out-of-pocket costs of an abortion, coupled with the additional travel costs, can impose severe financial hardship. If she is able to raise these unexpected funds at all, she will often have to do so by using one of the strategies described above, which can pose risks to her and her family's long-term stability, health, and well-being, and potentially jeopardize her safety and that of her children.

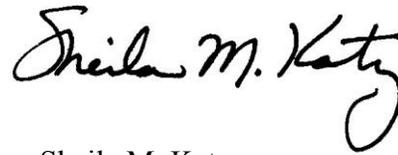
73. Increasing the costs and the logistical burdens of accessing abortion care may also make it impossible for a woman seeking an abortion to keep her decision confidential from her employer, or an abusive intimate partner who may not want her to terminate her pregnancy. A woman's fears of the consequences of this loss of confidentiality, of course, are in addition to the logistical and psychological hurdles that I previously discussed.

74. To give an example of how an unexpected medical cost can lead to extreme hardship, I interviewed a bright, engaged, optimistic woman in 2006 who seemed poised to overcome her circumstances and escape poverty. However, when I interviewed her again several years later, I learned that after a series of relatively minor events caused a downward spiral that escalated out of control, she ended up homeless and was living with her disabled son in a non-functioning car parked in a dangerous area of the city. Over the course of the interview, she revealed that she had suffered some health-related problems due to her diabetes but was unable to receive treatment in a timely manner given her financial situation. Despite being on Medicaid,

she could not afford the co-pays, drug costs, and other expenses necessary to keep her diabetes under control. As a result, her condition deteriorated, and due to complications from her diabetes, she suffered significant dental damage, which she could not afford to treat, and ended up losing all of her teeth. This, in turn made it impossible to find employment, and she eventually lost her apartment, lost her welfare benefits due to time limits imposed during the 1996 welfare reforms, lost her food stamps, and after her car broke down in an alley one night, could not even afford the relatively minor repairs the car needed to be functional. When I interviewed her in 2011, she and her son were living in that car with no income. While this story may seem extreme, it illustrates perfectly how poor and low-income women, who lack a strong support system or financial safety net to fall back on, are living at the brink of disaster, and how even a relatively minor financial obstacle can have devastating consequences.

75. It is my opinion that the increased costs, additional time, logistical challenges, and social-psychological hurdles imposed by the 2017 abortion restrictions are precisely the kind of challenges that delay women from accessing needed services, or prevent them from accessing such services altogether. Even the poor and low-income women who are able to raise funds to pay for an unexpected medical expense like abortion have to make difficult choices about where to get that additional money and what they are willing to sacrifice in order to raise the necessary funds. These choices put poor and low-income women at greater risk in terms of their safety, physical and emotional well-being, and the confidentiality of their decisions.

I declare under penalty of perjury that the foregoing is true and correct and that this declaration was executed on December 20, 2020 in Houston, TX.

A handwritten signature in black ink that reads "Sheila M. Katz". The signature is written in a cursive style with a large, looping 'y' at the end.

Sheila M. Katz

EXHIBIT A

Sheila M. Katz, Ph.D.

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ACADEMIC POSITIONS**CURRENT**

2014-present Assistant Professor, Department of Sociology, University of Houston, Houston, TX

- Tier One research and publication expectations, teach 2 sociology courses a semester (6 units), Affiliated Faculty with the Women, Gender, and Sexuality Studies program, and service to department, profession, university, and community.

PREVIOUS TENURE-TRACK POSITION

2008-2014 Assistant Professor, Sociology Department, Sonoma State University, Rohnert Park, CA

- Taught 3 sociology courses (12 units) a semester with liberal arts focus, advising load of 100 students, active research agenda, service to department, university, profession, and community.
- Tenure granted and promotion to Associate Professor awarded May 2014.

EDUCATION

- 2008 Ph.D. Sociology, Vanderbilt University, Nashville, TN
 Dissertation Title: *Pursuing a 'Reformed' Dream: CalWORKs Mothers in Higher Education after "Ending Welfare As We Know It"* Dissertation Committee: Karen Campbell (Chair), Laura Carpenter, Dan Cornfield, and Brooke Ackerly (Political Science).
- 2001 M.A. Sociology, Vanderbilt University
 Passed Master's Comprehensive Exams in January 2000
 Concentration on effects of gender, class, and race on education
- 1998 B.A. Sociology with Women's Studies certificate, University of Georgia
 Senior Thesis: "Acquaintance Rape on a Southern Campus"
 Study Abroad: Two semesters at Richmond College, London, England

RESEARCH AND TEACHING INTERESTS

Sociology of Gender, Poverty, Inequalities, Social Policy, Qualitative Methodologies, Sociology of Education, Violence Against Women, Applied Sociology.

RESEARCH PROJECTS IN PROGRESS

Extreme Poverty: Deep in the Heart of Texas; P.I.: Dr. Sheila Katz. Ethnographic research exploring the experiences of people living on less than \$2 a day in the state of Texas and across the south. Preliminary exploratory research started in summer 2018, will develop further in 2020.

Trapped by Poverty: Changing TRAP Laws in the Southern States Block Access to Reproductive Health Services for Low-Income Women, P.I.: Dr. Sheila Katz. Preliminary research began in 2014, but accelerated in 2019, and will develop further in 2020.

SCHOLARLY PUBLICATIONS**BOOK MANUSCRIPTS**

Katz, Sheila. 2019. *Reformed American Dreams: Welfare Mothers, Higher Education, and Activism*. New Brunswick, NJ: Rutgers University Press.

- Nominated for the American Educational Research Association's 2020 Outstanding Book Award.
- Nominated for 2020 ASA's Sociology of Education section's Bourdieu Best Book Award.

- December 2019, *Gender and Society* review of manuscript by Marcella Gemelli. Excerpt: “Katz makes a significant contribution to the welfare and women in poverty literature through her focus on higher education and the adjustment of the narrative of its benefit.”
- Featured by the *Chronicle of Higher Education* as one of the books in their “Selected New Books in Higher Education” article on July 14, 2019.
- *Choice*, a publication of the Association of College and Research Libraries, recommended the book in the November 2019 volume of the journal.

JOURNAL ARTICLES

Katz, Sheila. 2017. “Welfare Mothers’ Grassroots Activism for Economic Justice.” *Contemporary Social Science*: 12 (1-2): 96-109.

Charmaz, Kathy and Sheila Katz. 2017. “Subjective stories and social issues: Strategies for making connections.” *Qualitative Methods in Psychology Bulletin*, 23 (Spring 2017): 8-14.

Katz, Sheila. 2013. “‘Give Us a Chance to Get an Education.’ CalWORKs Mothers’ Survival Narratives and Strategies.” *Journal of Poverty*: 17(3): 273-304.

Katz, Sheila. 2012. “TANF’s 15th Anniversary: Are Low-Income Mothers Celebrating Upward Economic Mobility?” *Sociology Compass* 6/8 (2012): 657-670.

BOOK CHAPTERS

Katz, Sheila. 2019. “‘What’s Love Got to Do with It?’: The Embodied Activism of Domestic Violence Survivors on Welfare” chapter in *Body Battlegrounds*. Edited by Chris Bobel and Samantha Kwan. Vanderbilt University Press. Pgs. 144-159.

Katz, Sheila. 2018. “Pride and Hope, Shame and Blame: How Welfare Mothers in Higher Education Juggle Competing Identities,” Chapter 1 in *Advances in Gender Research*, volume 25: *Marginalized Mothers, Mothering from the Margins*. Edited by Tiffany Taylor and Katrina Bloch, Emerald Press. Pgs. 11-24.

Katz, Sheila and Laura McGuire. 2018. “Intimate Partner Violence in Higher Education: Integrated Approaches for Reducing Domestic Violence and Sexual Assault on Campus” chapter in *The Handbook on Violence in Education: Forms, Factors, and Preventions*. Edited by Harvey D. Shapiro, Wiley Blackwell Publishing. Pgs. 417-431.

Katz, Sheila. 2015. “Modern Herlands: The Significance of Gilman’s Herland for the Next 100 Years” chapter in *Censored 2016: The Top Censored Stories of 2014-2015*. Edited by Mickey Huff and Andy Lee Roth, Seven Stories Press. Pgs. 217-225.

BOOK REVIEWS

Katz, Sheila. 2017. Book Review for *addicted.pregnant.poor* (by Kelly Ray Knight, Duke University Press, 2015) in *Contemporary Sociology* 46(3), May 2017: 323-325.

Katz, Sheila. 2016. Book Review for *Families and poverty: everyday life on a low income* (by Mary Daly and Grace Kelly, Chicago and Bristol, Policy Press, 2015) in *Journal of Children and Poverty* 22(1), March 2016: 72-73.

Katz, Sheila. 2014. Book Review for *Ain’t No Trust: How Bosses, Boyfriends, and Bureaucrats Fail Low-Income Mothers and Why It Matters* (by Judith Levine, UC Press, 2013) in *Work and Occupations* 41(4): 522-524.

Katz, Sheila. 2010. Book Review for *Striving to Save* (by Margaret Sherrard Sherraden and Amanda Moore McBride, University of Michigan Press, 2010) in *Social Forces* 89(2): 727-728.

TEACHING PUBLICATIONS

Katz, Sheila. 2013. “Connecting Students to Careers: Teaching Students about Careers in Sociology.” Syllabus and course materials set peer-reviewed and published by the American Sociological Association’s Teaching Resource and Innovations Library for Sociology (TRAILS): <http://trails.asanet.org/Pages/Resource.aspx?ResourceID=12650>.

JOURNAL ARTICLES IN PROGRESS

- Katz, Sheila. "When Mama Goes to College: Low-Income Mothers' Orientation to Education Creates a Two-Generation Educational Orientation." In final preparation for *Gender and Society*.
- Katz, Sheila. "Racial and Ethnic Differences in Experience and Outcome of Higher Education for Mothers on Welfare: " In preparation for Winter 2021 journal submission.
- Katz, Sheila. "Which Capital Matters?: How Social, Cultural, and Human Capital Rationales and Resources Vary by Ethnicity of Mothers Pursuing Higher Education." Submission anticipated Spring 2021.
- Katz, Sheila. "Trapped by Poverty: Changing TRAP Laws in Southern States Block Access to Reproductive Health Services for Low-Income Women." Submission anticipated 2021.

BOOK CHAPTER IN PROGRESS

- Katz, Sheila. Invited contribution to a Festschrift honoring Dr. Kathy Charmaz. Editors: Adele Clark, Linda Belgrave, Tony Bryant. To be published in Norm Denzin's book series *Studies in Symbolic Interaction* in 2021/2 with Emerald Publishing.

RESEARCH GRANTS

EXTERNAL NATIONAL RESEARCH GRANTS AND AWARDS

- American Association of University Women, Summer Publication Fellowship, \$6,000, grant to finish *Reformed American Dreams* manuscript, grant period July 2016-June 2017.
- National Center for Student Parent Programs, Advanced Scholars Grant, \$10,000, PI on "Student Parents on Campus From Baby Boomers to Millennials: Best Practices for Student Parents Success in Higher Education." Awarded Dec. 2015, grant period December 2015-June 2017.
- Finalist for Pacific Sociological Association 2013 Early Career Award for Innovation in Teaching Sociology.
- National Poverty Center TANF Reauthorization Grant; 2011, \$11,700.
- Emerging Scholar award by the U.S. Department of Health and Human Services, Administration for Children and Families; 2011, \$1100.
- SAGE/Pine Forge Teaching Innovations & Professional Development Award; 2010, \$500.
- Ford Foundation Travel Grant; 2010, \$1500.
- National Science Foundation Dissertation Improvement Grant; 2007, \$7500.
- American Sociological Association Student Forum Travel Award; 2007, \$500.
- Society for the Study of Social Problems Lee Student Support Fund; 2007, \$500.

INTERNAL RESEARCH GRANTS AND AWARDS

- UH Provost's Teaching Excellence Award, March 2020, \$8000.
- UH Research Progress Grant, 2018, \$4000
- UH New Faculty Program Grant, 2014 (for summer 2015), \$6000
- SSU Travel Grants; 2008, 2010, 2011, 2012, 2013, \$800-\$2000
- SSU RSCAP Summer Writing Fellowship; 2012, \$3500.
- SSU School of Social Sciences Summer Research Grant; 2011, \$1000.
- SSU RSCAP Research Mini-Grant; 2010, \$2800.
- SSU RSCAP Summer Writing Fellowship; 2009, \$3400
- Vanderbilt Sociology Department Research Grant; 2007, \$300.
- Vanderbilt Political Science Department: Methodological Training; 2006, \$2800.
- Vanderbilt Graduate School Dissertation Enhancement Grant; 2006, \$2000.

TEACHING EXPERIENCE

UNIVERSITY OF HOUSTON COURSES (2014-PRESENT)

- Soc 3300: Sociological Theory (Fall 2016, Fall 2017)
- Soc 3346: Qualitative Research Methods (Fall 2014, Fall 2015)

Soc 3390: Sociology of Gender (Spring 2015, Fall 2015, Fall 2016, Spring 2019, Fall 2019, Spring 2020)
Soc 3395: Careers in Sociology (Spring 2016, Spring 2017, Spring 2018, Fall 2018, Fall 2019, Fall 2020)
Soc 3397: Special Topics in Sociology: Sex and Gender in Biology and Society (Spring 2017)
co-taught with Dr. Rich Meisel of the Biology and Biochemistry Department
Soc 6390: Graduate Seminar in Sociology of Gender (Fall 2014, Spring 2016, Fall 2018, Spring 2020)
Soc 6311: Graduate Seminar in Sociology of Poverty (Spring 2015, Fall 2020)
Soc 6311: Graduate Seminar in Qualitative Research Methods (Spring 2018)

UH MASTER'S OF ARTS IN SOCIOLOGY, INTERNSHIP STUDENTS, COMPLETED

Annie Pham, Internship, Chair.
Lisa Sargent, Internship, committee member.
Alyssa Yan, Internship, Chair.
Shannon McNamara, Internship, Chair.
Suezen Salinas, Internship, committee member.

UH MASTER'S OF ARTS IN SOCIOLOGY, THESIS STUDENTS, COMPLETED

Jonathan Khandaker, Thesis, committee member.
Fernando Clark, Thesis, Chair.
Andrew Strange, Thesis, committee member.

UH MASTER'S OF ARTS STUDENTS, CURRENT

Ben Dreon, Thesis, committee member.
Jay Stracke, Thesis, outside committee member.
Fernando Caberera, Thesis, committee member.

UH UNDERGRADUATE HONOR'S THESIS STUDENTS, COMPLETED

Edwin Villa, Honor's Thesis, Chair.
Chance Smith, Honor's Thesis, committee member.

UH UNDERGRADUATE STUDENTS MENTORED THROUGH THE SURF PROGRAM

Suezan Salinas
Marco Galvan

COURSES TAUGHT AT SONOMA STATE UNIVERSITY (2008-2014)

Soci 201: Introduction to Sociology
Soci 375: Classical Sociological Theory
Soci 443: Methods Seminar: Women and Social Policy (Focus Groups method)
Soci 498: Senior Research Seminar, Topic: The American Dream
Soci 312: Sociology of Gender
Soci 306: Careers in Sociology
Soci 340: Drugs and Society
Soci 496: Internship Practicum and Internship Coordinator

PROFESSIONAL PRESENTATIONS

INVITED KEYNOTE PRESENTATIONS

Visiting Scholar in March 2020 at the University of Hawaii's Bridge to Hope Program that serves student parents on welfare. The visit included a workshop with students, a community book presentation, a keynote talk, and a workshop with BtH staff.

Convocation lecture about *Reformed American Dreams* in February 2020 at Belmont University in Nashville, TN.

Invited Opening Speaker and Panel Moderator at the U.S. Department of Health and Human Services, 2015

Gateway to Opportunity: Improving Parental Employment and Family Well-Being Outcomes. 2015. "TANF Summit Opening Plenary: Reflections, Resilience, and Recommendations to Improve Family Well-Being." Washington, D.C.: H.H.S., Administration for Children and Families, Office of Family Assistance.

ACADEMIC CONFERENCE PRESENTATIONS

- Katz, Sheila. "What's Love Got to Do with It?: The Embodied Activism of Domestic Violence Survivors on Welfare." National Women's Studies Association annual meetings, San Francisco, November 2019.
- Katz, Sheila. "An American Dream for All: Poverty, Welfare, and Activism." Society for the Study of Social Problems annual meetings, New York City, August 2019.
- Katz, Sheila. "Pride and Hope, Shame and Blame: How Welfare Mothers in Higher Education Juggle Competing Identities." Southern Sociological Society annual meetings, New Orleans, April 2018.
- Katz, Sheila, Autumn Green, and Perry Threlfall. Workshop: "Student Parents on Campus: How Sociology Departments & Faculty Can Support Their Students Who Are Balancing College with Raising Children." American Sociological Association annual meetings, Montreal, Canada. August 2017.
- Katz, Sheila. "Welfare Mothers' Pathways out of Poverty towards the American Dream." Pacific Sociological Association annual meetings, Portland, OR. April 2017.
- Katz, Sheila. "Welfare Mothers' Grassroots Activism Visually Conceived." International Visual Sociology Association annual meetings in Oslo, Norway. June 2016.
- Katz, Sheila. "Mama Got Her BA: Welfare Mothers Completing Higher Education During the Great Recession." Society for the Study of Social Problems annual meetings, Chicago, IL. August 2015.
- Katz, Sheila. 2015. "Reforming the American Dream and Conforming Welfare Mothers." Pacific Sociological Association annual meetings, Long Beach, CA. April 2015.
- Katz, Sheila. 2015. "Using Your Research to Engage in the Policy or Legal Conversation: Tips for Writing Policy Briefs and Being an Expert Witness." Pacific Sociological Association annual meetings, Long Beach, CA. April 2015.
- Katz, Sheila. 2015. "Fragile Canaries: Social Characteristics that Strengthened or Devastated Former Welfare Mothers' Experiences in the Great Recession." Southern Sociological Society annual meetings, New Orleans, LA. March 2015.
- Katz, Sheila. 2015. "'Poverty Doesn't Have a Time Limit, Why Does Welfare?': Welfare Mothers' Grassroots Activism for Economic Mobility." Southern Sociological Society annual meetings, New Orleans, LA. March 2015.
- Katz, Sheila. "Evolving Oakland: Protesting Poverty, Fighting Inequality, Engaging the Community." American Sociological Association annual meetings, San Francisco, CA. August 2014.
- Katz, Sheila. "Student Parents' Experiences and Challenges at Sonoma State University." Student Parent Support Symposium at Ohio State University, Columbus, OH. May 2014.
- Katz, Sheila. "Former Welfare Mothers Re-envisioning the American Dream During the Great Recession." Pacific Sociological Association: Portland, OR, March 2014.
- Katz, Sheila. "Creating Career Connections: Teaching Students about Careers in Sociology." Pacific Sociological Association: Portland, OR, March 2014.
- Katz, Sheila. "Benefits of Higher Education for Single Mothers during the Great Recession." California Sociological Association: Berkeley, CA, Nov. 2013.
- Katz, Sheila. "The Canaries of the Urban Labor Market: What the Experiences of Low-Income Single Mothers who Pursued Higher Education Reveal about the Great Recession." Pacific Sociological Association: Reno, NV, March 2013.
- Katz, Sheila. "Low Income Families and the American Dream During the Great Recession." Pacific Sociological Association: Reno, NV, March 2013.
- Katz, Sheila. "Perspectives on the Great Recession from Welfare Mothers who Pursued Higher Education." American Sociological Association: Denver, August 2012.
- Katz, Sheila. "'Reformed' American Dreams: Welfare Mothers Pursuing Higher Education." Pacific

- Sociological Association: San Diego, CA, March 2012.
- Katz, Sheila. "Connecting Students to Careers: Teaching Students about Careers in Sociology." Pacific Sociological Association: San Diego, CA, March 2012.
- Katz, Sheila. "Advocacy for CalWORKs Mothers Pursuing Higher Education: Perspectives on TANF Reauthorization from the Ground Up." California Sociological Association: Berkeley, CA, Nov. 2011.
- Katz, Sheila. "'Just Give Us a Chance to Get an Education': Single Mothers' Survival Narratives and Strategies for Pursuing Higher Education While on Welfare." American Sociological Association: Atlanta, GA, August 2010.
- Katz, Sheila. "Teaching Focus Group Methodology to Undergraduates." Pacific Sociological Association: Oakland, CA, April 2010.
- Katz, Sheila and Anita Rees. "Education Works! Conducting Participatory Action Research with Mothers on Welfare" California Sociological Association: Berkeley, CA, Nov. 2009.
- Katz, Sheila. "'My Education Means Everything to Me': CalWORKs Mothers' Rationales for Pursuing Higher Education." American Sociological Association: San Francisco, August 2009.
- Katz, Sheila. "Pathways to Success: Women's Routes Through College After 'Ending Welfare As We Know It.'" Pacific Sociological Association: Portland, April 2008.
- Katz, Sheila. "Envisioning Another World: Welfare Mothers' Voices on Poverty Policy and TANF Reauthorization." American Sociological Association: New York, August 2007.
- Katz, Sheila. "Surviving the Welfare System: CalWORKs Mothers' Narratives about Education, Poverty, and Survival." Society for the Study of Social Problems: New York, August 2007.
- Katz, Sheila. "Pursuing Higher Education after 'Ending Welfare As We Know It:': Women's Narratives about Poverty and Education." National Women's Studies Association: Oakland, CA, June 2006.
- Katz, Sheila and Anita Rees. "Education Works! The Challenges Mothers on Welfare Face in Completing School." National Women's Studies Association: Oakland, CA, June 2006.
- Katz, Sheila. "Buying In: Participatory Action Research for Social Justice by CalWORKs Mothers and Supporters." 2nd International Congress on Qualitative Inquiry: U of Illinois, Urbana, May 2006.
- Spatz, Diana, Sheila Katz, and Leilani Luia. "Family Violence Is Not an Option: the Failure of CalWORKs to Serve Battered Women with Children." Institute for Women's Policy Research: Washington, D.C., June 2005.
- Katz, Sheila. "Large Group Participatory Action Research on 'Family Violence Is Not an Option': the Failure of CalWORKs to Serve Battered Women with Children." First International Congress on Qualitative Inquiry: University of Illinois, Urbana, May 2005.
- Kee, Lindsay, Sheila Katz, and Jennifer Howard. "Women's Social Policy and Research Center: A Model for Academic Activism." Southeastern Women's Studies Association: Blacksburg, VA, 2003.
- Katz, Sheila. "Home School State Regulations and the Actual Practice of Parents." Southern Sociological Society: New Orleans, LA, 2000.

GOVERNMENTAL POLICY RESEARCH PRESENTATIONS, WASHINGTON D.C.

- Katz, Sheila. 2011. "Welfare Mothers Pursuing Higher Education During the Great Recession: Implications for TANF Reauthorization" at the *Building Economic Security for Families in Crisis through Education, Employment and Child Care Congressional Briefing on TANF Reauthorization* at the Congressional Auditorium at the Capitol Hill Visitor's Center, December 2011. (<http://www.sonoma.edu/newscenter/2011/11/post-72.html>)
- Katz, Sheila. 2011. "Welfare Mothers Pursuing Higher Education During the Great Recession: Implications for TANF Reauthorization." US Department of Health and Human Services' Welfare Research and Evaluation Conference: Washington, D.C., June 2011.
- Spatz, Diana and Sheila Katz. 2005. "Marriage Promotion, Domestic Violence, and the Family Violence Option: Implications for the Reauthorization of TANF." Rayburn House Office Building, Capitol Hill: Washington, D.C., September 2005.
- Spatz, Diana and Sheila Katz. 2005. "HR 240 and Domestic Violence: How Marriage Promotion

Undermines Domestic Violence Prevention.” Cannon House Office Building, Capitol Hill: Washington, D.C., June 2005.

INVITED CONTRIBUTIONS AT ACADEMIC - COMMUNITY CONFERENCES

Presentation to the North Harris County AAUW chapter about *Reformed American Dreams*, April 2019.

Katz, Sheila. “Combatting Classism in the Classroom and on Campus: Strategies for Inclusive Higher Education” workshop at the UH Diversity Institute sponsored by the UH Center for Diversity and Inclusion. April 2018

Keynote presentation to Texas statewide AAUW annual conference about *Reformed American Dreams*, April 2018.

Presentation to the AAUW Fort Bend County chapter about *Reformed American Dreams*, February 2018.

Katz, Sheila. Participant at #RealCollege 2018 conference convened at Temple University; invited and funded by Dr. Sara Goldrick-Rab. Hope Center for College, Community, and Justice. September 2018.

Panel Participant, Houston Center for Photography “What Is Intersectionality?” panel discussion at art exhibit opening in October 2017.

Issue Expert Mentor, JCI of Houston (Junior Chamber International) for IMPACT Days 2015, February 2015-October 2015. “Reverse Pitch” to a group of 120 social entrepreneurs, I pitched a social problem that can be solved through social innovation, and I served as the “issue mentor” during the program. <http://impactdays.info/>

Katz, Sheila. Participant at the “Achieving Wider Access to Higher Education” conference convened and invited by the Howard Samuels Center of the City University of New York, at the Ford Foundation, New York City, February 2010.

Katz, Sheila. Workshop Facilitator: “What We Need to Succeed: Low-Income Student Mothers’ Narratives about Resources, Programs, Welfare, and Public Policy.” Ohio Student Parent Support Symposium. Ohio State University, Columbus, OH, June 2007.

Spatz, Diana and Sheila Katz. Workshop Facilitator: “Economic Context of Domestic Violence: Poverty and Welfare Policies Fail to Protect Battered Women with Children.” Collaboration between Fatherhood and Domestic Violence Programs in Communities of Color Institute: San Antonio, TX, October 2005.

APPLIED SOCIOLOGY

PROFESSIONAL, POLICY, AND COMMUNITY RESEARCH PUBLICATIONS

Ganote, Cynthia and Sheila Katz. July 2014. “Evolving Oakland: Five Years Living in a Gentrified, Occupied, and Artified City.” Pg. 7 in the American Sociological Association’s *Footnotes*.

http://www.asanet.org/footnotes/julyaugust14/images_new/footnotes_julyaugust14.pdf

Katz, Sheila. February 2014. “Hard Times and Inequality San Francisco Bay Area Style.” Pg. 1 in the American Sociological Association’s *Footnotes*.

http://www.asanet.org/footnotes/feb14/images_new/footnotes_feb14.pdf

Katz, Sheila and Anita Rees. May 2013. “Homeless in Pacifica? Understanding the Situation and Creating a Community Response.” Pacifica Family Resource Center: Pacifica, CA.

Katz, Sheila and Anita Rees. 2009. “*Education Works!* Policy Recommendations.” Low-Income Families Empowerment through Education: Oakland, CA.

Spatz, Diana and Sheila Katz. 2005. *Family Violence Is Not an Option: The Failure of CalWORKs to Serve Battered Women with Children*. Research Report. Low-Income Families’ Empowerment through Education: Oakland, CA.

Spatz, Diana and Sheila Katz. 2004. “Domestic Violence and TANF: Research Brief.” Low-Income Families’ Empowerment Through Education: Oakland, CA.

Katz, Sheila, Jennifer Howard, and Ronnie Steinberg. 2003. *Tennessee Women’s Scholarship Directory*. Women’s Social Policy and Research Center, Vanderbilt University: Nashville, TN.

PROFESSIONAL SERVICE

CURRENT NATIONAL SERVICE TO THE PROFESSION

Board Member, National Center for Student Parent Programs. January 2015-present.
Member of the National Student Parent Initiative Policy Working Group, organized by the Institute for Women's Policy Research, Washington, D.C., 2013-present.

RECENT NATIONAL SERVICE TO THE PROFESSION

Editorial Advisory Board Member, *Social Problems*. August 2015-August 2018.
Assistant Conference Organizer, 13th annual Student Parent Support Symposium, hosted by Endicott College, Boston, MA: June 2017.
Chair and committee member, Pacific Sociological Association's Community, Clinical and Applied Sociology committee, 2012-2016. Elected chair in April 2015.
Program committee member, Pacific Sociological Association annual meetings in March 2016.
Elected Board Member, Commission on the Accreditation of Programs in Applied and Clinical Sociology (CAPACS). June 2014-January 2016. <http://www.sociologycommission.org/>
Chair, American Sociological Association's Local Arrangements Committee for 2014 ASA annual meetings in San Francisco. Appointed by ASA President Annette Lareau to organize and chair the local arrangements committee for the national conference attended by approximately 6,000 sociologists each year. The committee organized eight local-themed sessions, conducted four tours, and wrote five local-themed articles for the ASA newsletter *Footnotes* for the 2014 annual meetings in San Francisco. I led 3 sociologically themed local tours, co-organized the "Evolving Oakland" session, solo-authored one article, and co-authored another article.
Advisory Board member, Student Parent Study Initiative, Institute for Women's Policy Research, Washington, D.C., December 2011-2015, funded by the Bill and Melinda Gates Foundation.
Article Reviewer, *Social Problems*, *Journal of Poverty*, *Sociological Perspectives*, *Sociological Quarterly*, *Work and Occupations*, *Journal of Contemporary Ethnography*, *Michigan Journal of Sociology*.
Book Reviewer, "Seeking the American Dream" by Robert Hauhart, Palgrave Publications, under contract; "Drugs and Drugs Policy" by Moshin and Atkins, Second Edition, Sage Publications, 2013; and "Drugs and The American Dream" by Adler, Adler, and O'Brien, February 2012 from Wiley Blackwell Publishing.
Faculty Mentor, American Sociological Association Honor Program 2010, Jessica Muscatell.
Session Organizer, Pacific Sociological Association April 2010, 3 sessions: Qualitative Research on Poverty, Qualitative Research on Welfare, and Teaching Focus Group Methodology. California.
Sociological Association November 2011: Women and Social Policy, and November 2009: Sociology of Gender.

UNIVERSITY OF HOUSTON SERVICE

Undergraduate Studies Committee, Department of Sociology, August 2015-present.
Sociology Student Association, faculty sponsor, Department of Sociology, September 2014-2017.
Hiring committee, Department of Sociology, 2014-2015.

COMMUNITY SERVICE

Mission Speaker at the Muscular Dystrophy Association annual fundraiser "Toast to Life" with Dr. Daniel Haworth, Houston, TX, January 2020. <https://www.youtube.com/watch?v=VFxCX7UrNH8>
Muscular Dystrophy Association, Houston Chapter: volunteer with the Muscle Walk and social media contributor. Spring 2019-present.
Treasurer, Executive Committee and board member to City of Oakland's KONO (Koreatown Northgate) Community Benefit District Board, April 2010-July 2014, (re-elected in January 2012).
Elected as Secretary on the Executive Committee, May 2010-August 2013 (re-elected January 2012).

Elected Treasurer in September 2013. Chair of Security and Operations Committee, October 2011-October 2013. www.konooakland.org.

Representative, Neighborhood Crime Prevention Council (NCPC) of District 8: Area 2, organized by the Oakland Police Department and City of Oakland, October 2012-December 2013.

Research Coordinator, "Homeless in Pacifica" project, Pacifica Resource Center, December 2012-June 2013. Worked with Executive Director to write a research brief about homeless in Pacifica.

Taught the course "Exploring the American Dream" in the University of Georgia's OLLI "Alumni College" Summer School program in June 2012.

Participant, California Partnership, community coalition fighting poverty, 2004-2009.

PROFESSIONAL AFFILIATIONS

American Sociological Association

ASA member of Sex & Gender; Sociology of Education; Poverty, Inequality, and Mobility sections

Society for the Study of Social Problems

National Women's Studies Association

International Visual Sociology Association

Southern Sociological Society

Pacific Sociological Association

PROFESSIONAL DEVELOPMENT

Participant, New Faculty Scholars Program, University of Houston, October 2014-May 2015.

Participant, SSU's Faculty Writing Program, Coordinated by Dr. Kathy Charmaz: 2007-2014.

Participant, ASA's Section on Teaching and Learning's Workshop, "The Best Teachers We Can Be: Learning Scholarly Teaching." Atlanta, GA, August 2010.

PREVIOUS RESEARCH AND TEACHING EXPERIENCE

Adjunct Lecturer, Sonoma State University Department of Sociology; Drugs and Society, Fall 2007 and Spring 2008

Qualitative Data Analysis Consultant, University of California Berkeley, School of Public Health

June 2007-August 2007: Conducted qualitative data analysis (using Atlas.ti) on focus groups and interviews for the Benefits of Diversity Project, addressing issues of racial and ethnic diversity in students and faculty in medical and public health schools, funded by the California Endowment.

Research Coordinator, Low-Income Families' Empowerment through Education (LIFETIME)

October 2003-December 2006: Coordinated community engaged research projects on a statewide research team to conduct research on welfare, domestic violence, and the experiences of welfare mothers in education. Co-authored "Family Violence Is *Not* an Option," a research report (June 2005) about the failure of CalWORKs to protect domestic violence victims and their children in the welfare system. Worked with media and other community-based organizations to disseminate research; worked with Executive and Associate Directors to raise \$1.5 million in foundation grants (average grant approximately \$20,000) over 2.5 years.

Research Associate, Vanderbilt University Women's Social Policy and Research Center

March 2002-October 2003: Lead author and researcher for *Tennessee Women's Scholarship Directory* (August 2003), a resource book of scholarships and financial aid options for higher education available to women in Tennessee; designed web site to support the directory, wrote grants, and conduct other fundraising to provide independent funding for the scholarship directory and the research center.

Worked with director on domestic violence in TN qualitative data collection and analysis in support of the TN Status of Women report for IWPR.

Adjunct Instructor, Vanderbilt University Department of Sociology; Women and Men in American Society, Fall 2002, Spring 2003, Summer I, Summer II 2003.

Research Assistant, Vanderbilt Institute for Public Policy, Immigrant Community Assessment

April 2003-August 2003: Performed qualitative data analysis of focus groups with immigrants and refugees in Nashville about their access to employment, health, and community services.

Teaching Assistant, Vanderbilt University, Department of Sociology; Gender in American Society, Contemporary Social Problems, Sociological Research Methods, Gender, Sexuality, and the Body, Women and the Law, Human Behavior in Organizations, Social Movements, Introduction to Sociology, Images of Women. Fall 1998-Spring 2002.