Exhibit 6 Declaration of Dr. Sheila Katz

IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF ALABAMA NORTHERN DIVISION

WEST ALABAMA WOMEN'S CENTER, et al.,

Plaintiffs,

v.

CIVIL ACTION NO.

DONALD E. WILLIAMSON, M.D., in his official capacity as State Health Officer of the State of Alabama,

Defendant.

DECLARATION OF SHEILA M. KATZ, PH.D.

Sheila M. Katz, Ph.D., declares and states as follows:

- 1. I am an Assistant Professor of Sociology at the University of Houston, in Houston, TX. My areas of expertise include gender, poverty, and social policy.
- 2. I joined the faculty at the University of Houston in August 2014. Previously, between 2008 and 2014, I worked at Sonoma State University in Rohnert Park, California, where I earned tenure in May 2014. I received my MA and PhD in Sociology from Vanderbilt University. I received my B.A. in Sociology and Women's Studies from the University of Georgia.
- 3. For the last 15 years, I have conducted research on poverty, women's economic status, and social policies at the state and federal level in the United States. I have published on these topics in sociology and poverty journals, and I am finishing a book manuscript on my research in this area. I have presented my research at numerous professional conferences and given expert testimony on these issues to the United States Congress in 2005, 2006, and 2011.

- 4. In 2011, I was named an "Emerging Scholar" in poverty and welfare research by the U.S. Department of Health and Human Services and received two national grants to support my work in this area from the National Poverty Center and the National Science Foundation. I serve on several national research and poverty advisory committees, where I work with other scholars on these issues.
- 5. I submit this Declaration as an expert in issues facing women living in poverty in the United States. 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 Declaration.
- 6. I understand from plaintiffs' counsel that under a regulation at issue in this case, an abortion clinic cannot operate unless either its physician has staff privileges at a local hospital or an outside physician with local hospital staff privileges agrees in writing to provide covering physician services for the clinic. It is my understanding that West Alabama Women's Center ("WAWC" or the "Tuscaloosa clinic") has long been the only abortion clinic in Tuscaloosa, and that it has been closed since the beginning of 2015 because it has been unable to comply with this regulation. I have been informed that the remaining abortion clinics in the state are located in Birmingham, Huntsville, Mobile, and Montgomery. I also understand that the Tuscaloosa clinic was one of two abortion clinics in Alabama that provided abortion services after 16 weeks of pregnancy, and that after WAWC's closure, the only provider of abortions after 16 weeks in Alabama is the clinic in Huntsville.
- 7. Through my research, I am familiar with the barriers to traveling long distances faced by low-income women. The elimination of abortion services in Tuscaloosa requires low-income women who would have obtained an abortion at the Tuscaloosa clinic to travel significant additional distance in order to obtain an abortion. As I explain below, this increase in

the travel distance to access abortion services will create significant additional financial burdens and social psychological stress on low-income and nearly low-income women who seek an abortion. It is my opinion that these additional burdens and the stress they impose will prevent many women in Alabama from seeking and obtaining abortions they otherwise would have obtained.

Poverty in Alabama

8. Alabama is the sixth poorest state in the nation, with an overall poverty rate in 2013 of 18.6%. American Fact Finder, Poverty Status in the Past 12 Months, 2009-2013 American Community Survey 5-Year Estimates (http://factfinder.census.gov/). This figure is much higher than the U.S. Poverty rate of 15.4%. Further, Alabama has the fourth lowest median income in the United States at \$42,757 a year according to the U.S. Census Bureau American Community Survey 2013. *Id.* (select "Median Household Income, in dollars" American Community Survey 3-Year Estimates). The city of Tuscaloosa has an even higher rate of poverty. The poverty rate for that same period in Tuscaloosa was 26.3%. *Id.* (enter "Tuscaloosa city, Alabama").

Low-Income Women in Alabama

9. The United States Department of Health and Human Services defines the federal poverty line as a single person who makes less than \$11,770 per year, with an additional \$4,160 per year for each additional member of the household. 2015 Poverty Guidelines, U.S. Dep't of Health and Human Servs., http://aspe.hhs.gov/poverty/15poverty.cfm (last visited June 27, 2015). Based on data from the American Community Survey for the last twelve months nearly half (45%) of the women in Alabama who are below the poverty level, and approximately one fourth of Alabama's total poor, are women of reproductive age (between the ages of 15-44). See

Easy Stats, U.S. Census Bureau, http://www.census.gov/easystats (last visited June 28, 2015) (select "Alabama," "Financial," "Poverty Status in the Past 12 Months by Sex by Age").

Women in Alabama have a higher poverty rate (20.3%) than men (16.7%). Poverty Status in the Past 12 Months, 2009-2013 American Community Survey 5-Year Estimates, U.S. Census Bureau, http://factfinder2.census.gov/ (last visited June 30, 2015) (enter "Poverty Status in the Past Twelve Months 2013 ACS 1-Year Estimates" and "Alabama").

- children under 18 in Alabama that are at or below the federal poverty threshold, according to the American Community Survey. Selected Characteristics of People at Specified Levels of Poverty 2009-2013, American Community Survey 5-Year Estimates, U.S. Census Bureau, http://factfinder2.census.gov/ (last visited June 30, 2015) (enter "Selected Characteristics 2009-2013 ACS 5-Year Estimates" and "Alabama"). For example, in Tuscaloosa, women head 54.7% of poor families with dependent children under 18. See Easy Stats, U.S. Census Bureau, http://www.census.gov/easystats (last visited June 30, 2015) (select "Poverty" "Selected Characteristics 2009-2013 ACS 5-Year Estimates" for Tuscaloosa city, Alabama).
- an inadequate measure of poverty in the United States. The guideline is based on a formula from the 1960s assuming families spend approximately one-third of their budget on food, which is no longer the case amid rising costs for housing and transportation. The guideline also does not take into account other costs most families pay, such as for child care, medical expenses, utilities, and taxes. Some federal, state, and local social programs recognize that this guideline is too low, and set eligibility requirements at 125, 150, or 200 percent of the guideline. For a family of three, a single mother and two children, those amounts would be \$25,112 (at 125%), \$30,135 (at 150%),

and \$40,180 (at 200%) respectively. Research shows that even families who are making more than twice the federal poverty level still have trouble making ends meet and paying for basic expenses. See Gregory Acs & Pamela Loprest, Who are Low-Income Working Families?, The Urban Institute (Sept. 2005), available at

http://www.urban.org/UploadedPDF/311242_working_families.pdf. In Alabama, nearly 40% (1,892,843) of residents live within 200% of the federal poverty threshold. Selected Economic Characteristics, 2013 American Community Survey 1-Year Estimates, U.S. Census Bureau, http://factfinder2.census.gov (last visited June 30, 2015) (enter "Poverty Status in the Past Twelve Months 2013 ACS 1-Year Estimates" and "Alabama"). The median household income in Tuscaloosa is \$37,901, which is much less than 200% of the federal poverty level. Also, the city's median household income is considerably lower than the statewide Alabama median household income. American Community Survey 2009-2013, 3-Year Estimates, U.S. Census Bureau, http://quickfacts.census.gov/ (last visited June 30, 2015).

12. The amount needed to maintain a minimally self-sufficient standard of living in Alabama is closer to at least twice the amount of the federal poverty threshold. For example, the fair market rent, as designated by the U.S. Department of Housing and Urban Development, for Tuscaloosa is \$572 for a one bedroom and \$757 for a two bedroom apartment. FY2015 FMR Geography Summary for Tuscaloosa, AL MSA, (last visited June 28, 2015). If a woman in Tuscaloosa is working full time (40 hours a week) at the federal minimum wage of \$7.25 per hour, her annual earnings are approximately \$14,500, which is just above the federal poverty threshold if no one else lives in her household, and under the poverty line if she has any children. Working full-time, year round at the minimum wage, her housing cost is 47% of her monthly

income of \$1208 for a one-bedroom apartment, and 63% of her monthly income for a two-bedroom apartment.

Poverty and Unintended Pregnancies

- 13. The rate of unintended pregnancy for women below 100% of the poverty line is more than five times the rate for women above 200% of the poverty line. See Lawrence B. Finer and Mia R. Zolna, Unintended Pregnancy in the United States: Incidence and Disparities, 2006, 84 Contraception 478, 483 (2011), available at https://www.guttmacher.org/pubs/US-Abortion-Patients.pdf. Approximately 130 women per 1000 women of reproductive age below the poverty line will have an unintended pregnancy in a year, versus 90 women per 1000 at 100% to 200% of poverty and 24 women per 1000 at above 200% of poverty. Id.
- abortions per 1,000 women of reproductive age. See State Facts about Abortion Alabama,
 Guttmacher Institute, https://www.guttmacher.org/pubs/sfaa/alabama.html (last visited July 3,
 2015). In 2008, 42% of women having abortions in the United States as a whole had incomes
 below the federal poverty level, and another 27% had incomes below 200% of the federal
 poverty level. See Rachel K. Jones, Lawrence B. Finer, and Susheela Singh, Characteristics of
 U.S. Abortion Patients, 2008, Guttmacher Institute, https://www.guttmacher.org/pubs/USAbortion-Patients.pdf (May 2010). A full 69% of those seeking abortions nationally were below
 200% of the federal poverty rate. Id.
- 15. Given these numbers and the high rate of poverty in Alabama, we can extrapolate that a significant majority of women who are seeking abortions in Alabama are at or below the 200% poverty rate.

Burdens of Travel

16. Intercity transportation for low-income women presents logistical, financial, and psychological hurdles that will prevent numerous poor women from being able to travel to seek an abortion.

A. Transportation

- 17. The additional travel required by the law alone is likely to prevent a significant number of women from obtaining abortions. Low-income women are far more likely to use public transportation as their primary source of transportation than any other sector of the population. American Public Transportation Association, A Profile of Public Transportation Passenger Demographics and Travel Characteristics Reported in On-Board Surveys 7 (May 2007), available at http://www.apta.com/resources/statistics/Documents/transit_passenger_characteristics text 5 29 2007.pdf.
- 18. The only significant intercity transportation that serves women in Alabama who do not own cars is private bus service. I understand that many abortion providers require that someone accompany the woman home from the procedure when they use a sedative; therefore, this cost can actually be double, or the cost of two round-trip bus tickets. Alabama is served by four private bus companies offering service between major cities. The tables below use the Greyhound bus service and provide the round-trip ticket prices, the frequency of service, and the length of the round-trip bus ride between the relevant cities, as well as information on ground transportation from the bus terminal to the clinics in the relevant cities. The trip length is based on how long it may take a woman to catch a return bus to her home city, which may push a trip to more than a day long. Prices fluctuate greatly both among bus carriers and among each carrier's departure times. Often, but not always, a shorter trip is associated with a higher ticket price.

Travel price and time excluding waiting, procedure, and overnight stays:1

Round Imp Between	Tuscaloosa and Birmingha	mby Grey tound Bus 🗫	
Transit Type	Price	Frequency of	Minimum Length
		Service/Method of	of Trip
		Transportation	
Round-Trip bus	\$22.00-\$33.00	Approximately 4 per	1hr. each way
fare between		day each way	
Tuscaloosa and		•	
Birmingham		,	
Option 1: Taxi	\$9.50-16.50 each way	Taxi	10 min. in city
from Greyhound			traffic each way
station to clinic and			,
back	`		
Option 2: public	\$1.25 each way	Birmingham Jefferson	35 min.
transportation (bus)		County Transit	. '
from Greyhound		Authority, Bus Route	
station to clinic and	·	12, and a 10 minute	·
back		walk	
Totals:	\$24.50-\$66.00		2 hr. 30 min.
			minimum (3 hr. 20
			min. minimum for
		. 19 e. e	women taking
			BJCTA in
			Birmingham)

Round Inp Between Tuscaloosa and Huntsville by Greyhound Bus				
Transit Type	Price	Frequency of	Minimum Length of	
		Service/Method of	Trip	
		Transportation	•	
Round-Trip bus	\$79.50-\$114.50	Approximately 2 per	3 hr., 15 min. each	
fare between		day to Huntsville; 3	way	
Tuscaloosa and	·	per day to		
Huntsville		Tuscaloosa		
Option 1: Taxi	\$13-19.50 each way	Taxi	10 min. in city	
from Greyhound	·	·	traffic each way	
station to clinic and			· ·	
back	•			

 $^{^{1} \} Tables \ compiled \ with \ data \ from \ \underline{http://www.greyhound.com}, \ \underline{http://www.taxifarefinder.com/rates.php}, \ \underline{http://www.huntsvilleal.gov/PublicTran/public_trans.php}, \ and \ \underline{https://www.bjcta.org}.$

Option 2: public transportation (bus) from Greyhound station to clinic and back	free	Huntsville Shuttle bus #9, and a 12 minute walk	1 hr. each way
Totals:	\$79.50-\$153.50		7 hr. minimum (8 hr. minimum for women taking the Huntsville Shuttle)

Round-Imp Between	Montgonsery and Bunisvill	e by Greyhound Bus	
Transit Type	Price	Frequency of	Minimum Length of
1.		Service/Method of	Trip
		Transportation	
Round-Trip bus	\$84.00-\$121.50	Approximately 2 per	4.5 hr. to Huntsville;
fare between		day to Huntsville; 3	4 hr. to Montgomery
Montgomery and		per day to	
Huntsville	•	Montgomery	
Option 1: Taxi	\$13-19.50 each way	Taxi	10 min. in city
from Greyhound			traffic each way
station to clinic and			
back		• .	
Option 2: public	free	Huntsville Shuttle	1 hr. each way
transportation (bus)		bus #9, and a 12	•
from Greyhound	·	minute walk	
station to clinic and			
back			
Totals:	\$84.00-\$160.50		8 hr., 50 min.
		·	minimum (9 hr., 30
			min. minimum for
			women taking the
			Huntsville Shuttle)

Round-Iluip Between Biantinghain and Hignesville by Greybound Bus.				
Transit Type	Price	Frequency of Service/Method of Transportation	Minimum Length of Trip	
Round-Trip bus fare between Birmingham and Huntsville	\$52.50-\$76.00	1-3 per day to Huntsville; 1-2 per day to Birmingham	4.5 hr. to Huntsville; 4 hr. to Montgomery	
Option 1: Taxi from Greyhound station to clinic and back	\$13-19.50 each way	Taxi	10 min. in city traffic each way	

Option 2: public transportation (bu from Greyhound station to clinic arback	nd	Huntsville Shuttle bus #9, and a 12 minute walk	1 hr. each way
Totals:	\$52.50-\$115.00		3 hr., 52 min.
	A CONTRACTOR OF THE PROPERTY O		minimum

- different city to seek an abortion. However, many low-income women in Alabama 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. See Elaine Murakami and Jennifer Young, Daily Travel by Persons with Low Income (National Personal Transportation Survey Symposium Presentation, Oct. 26, 1997), http://nhts.ornl.gov/1995/Doc/lowinc.pdf. Most cars that low-income families owned were an average of ten years old, as compared to 7.4 years old for other families. Id. Many low-income car owners do not have a car that is reliable enough for intercity trips. The car's age or mechanical condition will make it unlikely to be able to safely make a long road trip. Therefore, even those low-income women who own cars may have to travel by public transportation, if available, or in the case of Alabama women, private bus service.
- 20. Alabama's women also have more limited access to private cars than men do.

 Based on an analysis of the data available through the U.S. Census Bureau's American

 Community Survey, 19,425 women workers in Alabama live in a household with no vehicle, and women workers are more likely than male workers to live in a household with no car. Sex of

 Workers by Vehicles Available, 2009-2013 American Community Survey 5-Year Estimates, U.S.

 Census Bureau, http://factfinder2.census.gov/faces/nav/jsf/pages/searchresults.xhtml?refresh=t

(last visited June 29, 2015) (enter "Sex of Workers by Vehicles Available 2013 ACS 5-Year Estimates" and "Alabama"). 220,151 female workers in Alabama live in a household that has only one car, and the gender difference is evident: 23.8% of women workers versus 16.1% of male workers live in households with only one car. *Id*.

21. The following is the round-trip distance, time, and gas cost for the trips between the three cities losing abortion services and those retaining them:

Origin City	Destination City	Round-trip Distance in Miles ²	Round-trip Time	Estimated Gas Cost ³
Tuscaloosa	Birmingham	122	2 hr	\$15.20
Tuscaloosa	Huntsville	310	4 hr 40 min	\$38.60
Montgomery	Huntsville	380	5 hr 40 min	\$47.30
Birmingham	Huntsville	202	3 hr 10 min	\$25.15

22. This burden is multiplied by the two trips many women must make to access abortion services in Alabama due to the state's 48-hour waiting period. Either these transportation costs are doubled for two trips, or women must pay for a hotel room for at least two nights. One web site lists the average cost of a hotel room in Huntsville at \$96 per night. See http://www.expedia.com/Hotels (last visited June 29, 2015).

B. Time Away From Work

23. 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

² For consistency, I calculated this distance on Google maps from the city center to the address of providers in Birmingham and Huntsville.

³ Gas cost was calculated using the average gas mileage for a 2006 model year small/mid-size sedan. See Daily Fuel Gauge Report: Fuel Cost Calculator, Am. Auto. Ass'n (AAA), http://fuelgaugereport.aaa.com/fuelcostcalculator/ on June 29, 2015.

compensated leave. See An Introduction to Paid Time Off Banks, Institute for Women's Policy Research (June 20, 2012), http://www.iwpr.org/blog/2012/06/20/an-introduction-to-paid-time-off-banks.

- 24. Even seeking *uncompensated* time off can be a struggle for low-wage workers, who often have less autonomy in setting their work schedules. Because so much 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 an employee is 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 low-income woman to keep her abortion confidential from her supervisor or other employees.
- 25. In order to travel to an out-of-town clinic to obtain an abortion, women will miss significantly more work than would be the case for a woman seeking an abortion in the city where she lives. For example, a woman travelling from Tuscaloosa to Huntsville could miss two days of work, if not more, given bus schedules, travel time to the clinic, counseling period, procedure time, and travel time home. If a low-income woman is able to get time off, she is likely to forego lost wages, in addition to paying for transportation and lodging. The median wage for servers in Alabama, a common low-wage occupation for women, is \$8.74 an hour. *May 2014 State Occupational Employment and Wage Estimates Alabama*, Bureau of Labor Statistics, http://www.bls.gov/oes/current/oes_al.htm#35-0000 (last visited June 29, 2015). Forgoing two eight-hour shifts to travel to another city for an overnight stay is \$139.84 in lost wages, and three days missed work is \$209.76. The expense of lost wages is on top of the cost of the abortion and the additional travel costs.

C. Time Away from Home

- 26. More than half of women who obtain abortions have had at least one child. See Karen Pazol, et. al., Ctrs. for Disease Control and Prevention, Abortion Surveillance—United States 2009, Surveillance Summaries, Nov. 23, 2012, at 7, available at http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6108a1.htm (59.9% of women who obtained abortions in 2009 have previously had one or more live births). For many low-income women, then, a two-day out-of-town trip to seek an abortion will thus require seeking childcare for the entire time they are out of town. Round-the-clock childcare is quite expensive and hard to find. Many women 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. Having to ask a family member or friend for overnight child care in order to travel for the abortion could require that a woman disclose why she is traveling, making it difficult for a low-income woman to keep her abortion confidential. Often, however, lowincome women do not have family members or friends who are able to care for the children or that they can entrust with their children. The weekly average rate for childcare in Alabama is around \$100 per child. See Office of Child Care Subsidy, Alabama Department of Human Resources, Alabama Child Care Market Rate Survey: 2009 11, available at http://dhr.alabama.gov/documents/Market Rate Survey Rpt.pdf. Child care will present an additional burden associated with travelling to seek an abortion.
- All of these monetary costs and logistical tangles may not ultimately fully reflect how daunting a cross-state trip may be for a low-income woman who has lived all of her life in Tuscaloosa. For many of those who live in poverty in urban areas, asking them to travel a few hundred miles to a different city may as well be asking them to travel to another country.

Without access to discretionary funds for travel, they may never have traveled outside their home metropolitan area, and may live the vast majority of their day-to-day life in a single neighborhood. Even if they are able to line up the money required to take the trip, the stress or social psychological hurdle of a long trip to an unfamiliar city, where they may know no one, may delay or ultimately prevent many low-income women from travelling to seek abortion services. If services are not available within their town or within a reasonable distance, these services might as well not exist. I believe that the stress or social psychological hurdle is as serious a burden as the additional costs represented by travel. Taken together, these burdens will simply put an abortion out of reach for a significant number of women who would otherwise seek it.

28. To be clear, I have worked extensively with low-income women for the past fifteen years and I find them to be as bright, capable, and resourceful as any other population. My opinions are not intended to suggest otherwise. For example, women I have worked with can recite, off the tops of their heads, the prices of various food items sold at the corner store down to the last cent because they have years of experience trying to feed themselves and their family with extremely limited funds. But the ability to navigate intercity travel that wealthy or middle-income people may take for granted is similarly built upon years of experience doing just that. All too often, however, the discretionary income and resources that enable such travel is significantly less likely to be part of poor women's lived experiences.

D. Bottom Line

29. In addition to the cost of the abortion procedure, which is itself at least several hundred dollars, for women who would have obtained an abortion in Tuscaloosa, the elimination of abortion services in that city adds significant costs associated with the travel, time away from

work, and child care to the cost of an abortion, based on the data discussed in this report. That amount represents a significant burden to someone who makes just \$1208 a month, before paying rent, utilities, or food and transportation costs. *See supra* paragraph 12.

- 30. In order for a low-income or near low-income woman to attempt to afford these additional costs, she would have to make severe financial sacrifices and hard decisions. I know from my own research with low-income women and review of the extensive literature on the subject that when emergencies or additional necessary expenses occur in their lives, low-income women attempt to meet those expenses in three primary ways. First, they make sacrifices in other areas, usually by not paying rent or utilities, or by drastically reducing their food budgets and going hungry. This jeopardizes their health and well-being, or their housing situation, as well as that of their children and families. For example, housing for most low-income women is tenuous at best, and one late rent payment can get a low-income woman evicted. A second strategy is using payday loans or other predatory lending practices, incurring high interest rates and fees that compound the expense of travel.
- 31. The third strategy can be even more dangerous. Some low-income women may be lucky enough to know a trusted friend with the discretionary income to loan the hundreds of dollars needed for the months or years it may take her to pay it back, but many are not. Instead, they may borrow that money 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 low-income women, this strategy can be incredibly dangerous. See Martha Davis, The Economics of Abuse: How Violence Perpetuates Women's Poverty in Battered Women, Children, and Welfare Reform 17 (Ruth Brandwein ed., 1999). In my own interviews, women talk about the economic necessity of relying on or returning to an abusive ex-boyfriend to help make ends meet in emergencies. They

discuss how they have to weigh if the abuse can be tolerated as long as they are not homeless or hungry. Raising the price by adding travel costs may make it impossible for a woman seeking an abortion to keep it confidential from 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 she will have to overcome in order to travel to the remaining providers. Moreover, it is worth noting that according to recent research from Roberts, et al. at the University of California San Francisco, 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 them in contact with violent partners, and putting women and their children at risk." See Roberts et al., Risk of Violence From the Man Involved in the Pregnancy After Receiving or Being Denied an Abortion, 12 BMC Med. 1 (Sept. 2014), available at http://www.biomedcentral.com/content/pdf/s12916-014-0144-z.pdf.

32. Ultimately, however, many low-income women will not be able to afford these additional costs, even if some may be able to employ the strategies discussed above. It is my opinion that this increased cost in money, increased time required, logistical challenges, and psychological hurdles for low-income women will work together to present an insurmountable burden in seeking abortions for many women who would otherwise have obtained an abortion at the Tuscaloosa clinic.

Sheila M. Katz