

Working to end sexual violence in Maryland

P.O. Box 8782 Silver Spring, MD 20907 Phone: 301-565-2277 Fax: 301-565-3619 For more information contact: Lisae C. Jordan, Esquire 443-995-5544 mcasa.org

Testimony Supporting House Bill 1412 Lisae C. Jordan, Executive Director & Counsel

March 8, 2024

The Maryland Coalition Against Sexual Assault (MCASA) is a non-profit membership organization that includes the State's seventeen rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute (SALI), a statewide legal services provider for survivors of sexual assault. MCASA represents the unified voice and combined energy of all of its members working to eliminate sexual violence. MCASA urges the Health & Government Operations Committee to issue a favorable report on House Bill 1412.

House Bill 1412

Abortion Care Access Grant Program Fund-Safety & Security for Clinic Patients

This bill will establish the Abortion Care Access Grant Program Fund to improve access to abortion care services and protect patients seeking abortion care. These patients include survivors of rape who seek to terminate pregnancies caused by the sexual assault.

This bill is similar to HB1091, however, it includes mandatory funding and financial support from health insurance carriers. Additionally, it would be administered by the Maryland Department of Health, an agency best suited to administering a fund supporting health care providers. For these reasons, MCASA prefers the provisions of this bill.

Access to abortion care is vital to survivors of rape.

The CDC reports that almost 3 million women in the U.S. experienced Rape-Related Pregnancy (RRP) during their lifetime. https://www.cdc.gov/violenceprevention/sexualviolence/understanding-RRP-inUS.html

A three year longitudinal study of rape-related pregnancy in the U.S., published in the American Journal of Obstetrics and Gynecology (1996, vol. 175, pp. 320-325), found:

5% of rape victims of reproductive age (age 12-45) became pregnant as a result of rape, with the majority of pregnancies in adolescents. Of these, <u>half terminated the pregnancy.</u>

Adolescents are more likely to become pregnant as result of rape because they are less likely to be on birth control or to seek emergency contraception following a rape. 29% of all forcible rapes occurred when the victim was less than 11 years old; 32% of all forcible rapes occurred when the victim was between the ages of 11 and 17.

Survivors of Reproductive Coercion Need Access to Abortion Care

Reproductive coercion is a form of intimate partner violence where a woman's partner tries to control reproductive decisions by preventing access to or tampering with birth control, or forcing sexual intercourse with the intent of causing pregnancy. Of women who were raped by an intimate partner, 30% experienced a form of reproductive coercion by the same partner. Specifically, about 20% reported that their partner had tried to get them pregnant when they did not want to or tried to stop them from using birth control. About 23% reported their partner refused to use a condom. https://www.cdc.gov/violenceprevention/sexualviolence/understanding-RRP-inUS.html

These survivors need access to abortion care if they become pregnant and choose not to continue the pregnancy.

House Bill 1412 will provide health care facilities with practical operational support needed to help ensure that the survivors and other patients seeking abortion care are safe.

The Maryland Coalition Against Sexual Assault urges the Health & Government Operations Committee to report favorably on House Bill 1412

