



**Written Testimony of Olivia F. Summers¹
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Re: In Support of H.B. 1317, Health – Informed Consent, “Woman’s Right to Know Act”

March 9, 2022

For the reasons set forth herein, the American Center for Law & Justice (“ACLJ”), on behalf of over 260,000 concerned citizens, including nearly 3,200 from Maryland who have signed onto our Committee to Defend Pro-life Laws, urges that Maryland legislators vote YES on H.B. 1317. The Woman’s Right to Know Act is constitutional under the U.S. Constitution and Supreme Court precedent.

1. The Woman’s Right to Know Act Serves Maryland’s Profound and Valid Interest in Informing Women About the Facts of Abortion

In *Planned Parenthood v. Casey*, the Supreme Court ruled that States have a profound and valid interest in taking “measures to ensure that the woman’s choice [whether to have an abortion] is informed” Further, “measures designed to advance this interest will not be invalidated as long as their purpose is to persuade the woman to choose childbirth over abortion.”²

The Court also stated,

[The] lack of information concerning the way in which the fetus will be killed . . . is of legitimate concern to the State. The State has an interest in ensuring so grave a choice is well informed. It is self-evident that a mother who comes to regret her choice to abort must struggle with grief more anguished and sorrow more profound when she learns, only after the event, what she once did not know: that she allowed

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²*Planned Parenthood v. Casey*, 505 U.S. 833, 878 (1992).

a doctor to pierce the skull and vacuum the fast-developing brain of her unborn child, a child assuming the human form.³

2. *The Woman's Right to Know Act Ensures that Women Actually have Choices*

If you only have one option, it is not a real choice. As the Supreme Court stated in *Casey*, what abortion laws serve to protect “is the woman’s right to make the ultimate decision, not a right to be insulated from all other[decisions] in doing so.”⁴

Abortion is an act that is intended to permanently end the life of an unborn child. That act is extremely grave, gruesome, and irreversible. Thus, a woman’s decision should be fully informed, and should be made only after careful consideration of all the facts.

Informed consent laws, such as H.B. 1317, properly require doctors and assistants to disclose to women the nature and risks of the abortion procedure, as well as the effect of the abortion on the unborn child – namely, the type of procedure that will be performed, as well as the pain the unborn child may feel during abortion that end his or her life. House Bill 1317 also appropriately requires that women be informed of *alternatives* to abortion, and that they be counseled accordingly.

Ensuring that a woman is fully aware of all these facts informs her decision and truly gives her choices.

3. *Abortion is Harmful to Women*

Published research strongly indicates that abortion, rather than being safe – even safer than childbirth as most pro-abortion advocates falsely claim – is in fact more dangerous.

In Finland, for example, researchers drew upon national health care data to examine the pregnancy history of all women of childbearing age who died, for any reason, within one year of childbirth, abortion, or miscarriage, between the years of 1987 and 1994 (a total of nearly 10,000 women). The study found that, adjusting for age, women who had abortions were 3.5 times more likely to die within a year than women who carried to term.⁵

A subsequent study based upon Medicaid records in U.S. State, California, likewise found significantly higher mortality rates after abortion. The study linked abortion and childbirth records in 1989 with death certificates for the years 1989-97. This study found that, adjusting for age, women who had an abortion were 62% more likely to die from any cause than women who gave birth.⁶

Yet another study, this one of nearly a half million Danish women, found that the risk of death after abortion was significantly higher than the risk of death after childbirth.⁷ The study specifically

³*Gonzales v. Carhart*, 550 U.S. 124, 159-60 (2007).

⁴*Casey*, 505 U.S. at 877.

⁵ Mika Gissler, et al., Pregnancy-associated deaths in Finland 1987-1994-definition problems and benefits of record linkage, 76 *Acta Obstetrica et Gynecologica Scandinavica* 651 (1997).

⁶ David C. Reardon, et al., Deaths Associated with Pregnancy Outcome: A Record Linkage Study of Low Income Women, 95 *SO. MED. J.* 834 (2002).

⁷ David C. Reardon & Priscilla K. Coleman, Short and Long Term Mortality Rates Associated with First Pregnancy Outcome: Population Register Based Study for Denmark 1980-2004, 18 *MED. SCI. MON.* 71 (2012).

examined both early (before 12 weeks' gestation) and late (after 12 weeks' gestation) abortions, and found statistically significantly higher death rates for both groups as compared to mortality after childbirth.

A more recent meta-analysis of nearly 1000 studies concluded that a woman's risk of premature death increases by 50% after having an abortion, and that this lethal effect lasts at least ten years.⁸

The Finland and California studies mentioned above both showed, inter alia, a heightened risk of suicide after abortion.⁹ (The Danish study did not examine this aspect.) A British study found the same thing.¹⁰ All these studies are consistent with the many studies documenting adverse emotional consequences after abortion.¹¹

Of course, abortion can also cause physical harm, beyond the harm (i.e., death) to the unborn child. This can result directly from the procedure itself (e.g., perforation of the uterus, laceration of the cervix), from the deprivation of the health benefits of continuing pregnancy (e.g., eliminating the protective effect of a full-term pregnancy against breast cancer),¹² or by masking other dangerous symptoms (e.g., a woman with an infection or an ectopic pregnancy may believe her symptoms are merely normal after-effects of abortion, leading her to delay seeking medical help).¹³

Furthermore, another U.S. study revealed that

58.3% of the women reported aborting to make others happy, 73.8% disagreed that their decision to abort was entirely free from even subtle pressure from others to abort, 28.4% aborted out of fear of losing their partner if they did not abort, 49.2% reported believing the fetus was a human being at the time of the abortion, 66% said they knew in their hearts that they were making a mistake when they underwent the abortion, 67.5% revealed that the abortion decision was one of the hardest

⁸ David C. Reardon & John M. Thorp, *Pregnancy Associated Death in Record Linkage Studies Relative to Delivery, Termination of Pregnancy, and Natural Losses: A Systematic Review with a Narrative Synthesis and Metaanalysis*, 5 *Sage Open Medicine* 1 (2017).

⁹ See also Mika Gissler, et al., *Suicides after Pregnancy in Finland: 1987-94: Register Linkage Study*, 313 *BRITISH MED. J.* 1431 (1996) (suicide rate after induced abortion was six times higher than suicide rate after childbirth).

¹⁰ Christopher L. Morgan, et al., *Mental Health May Deteriorate as a Direct Effect of Induced Abortion*, 314 *BRITISH MED. J.* 902 (Mar. 22, 1997) (letters section) (found suicide attempts more than four times as frequent after abortion than after childbirth).

¹¹ See David C. Reardon, *Abortion Decisions and the Duty to Screen: Clinical, Ethical and Legal Implications of Predictive Risk Factors of Post-Abortion Maladjustment*, 20 *J. CONTEMP. HEALTH L. & POL'Y* 33, 39 n.14 (2003) (citing nearly three dozen sources).

¹² See Justin D. Heminger, *Big Abortion: What the Antiabortion Movement Can Learn from Big Tobacco*, 54 *CATH. U.L. REV.* 1273, 1288-89 & nn.119 & 121 (2005).

¹³ See generally *Physical Effects of Abortion: Fact Sheets, News, Articles, Links to Published Studies and More*, THE UNCHOICE, www.theunchoice.com/physical.htm (listing sequelae and referencing sources) (last visited 29 Aug. 2020).

decisions of their lives, and 33.2% felt emotionally connected to the fetus before the abortion.¹⁴

In that same study, the women were asked what positives stemmed from their decision to abort. Twenty-two percent of the women chose not to answer this question, while 31.6% responded by choosing the survey answer as “none.”¹⁵

When asked about the most significant negatives that had impacted them from the decision to abort, women listed the following:

- Took a life/loss of a life of lives
- Depression
- Guilt/Remorse
- Self-hatred/anger at self/self-loathing/feelings of worthlessness/unworthy of love
- Shame
- Addiction, alcohol or drug abuse
- Regret
- Self-destructive behaviors including promiscuity, self-punishment, and poor choices
- Low self-esteem
- Anxiety/fear
- Suicidal/suicidal thoughts/wanting to die/self-harm/dangerous risks/suicidal attempts.¹⁶

All of these factors contribute to the negative and even devastating effects abortion has on women and girls, which is why the bills like H.B. 1317 are so incredibly important.

4. *The Woman’s Right to Know Act is Not a “Substantial Obstacle” to a Woman’s “Right to Choose”*

It is undisputed that the abortion precedents of the U.S. Supreme Court allow states to create and enforce “[r]egulations which do no more than create a structural mechanism by which the State or the parent or guardian of a minor, may express profound respect for the life of the unborn . . . if they are not a substantial obstacle to the woman’s exercise of the right to choose.”¹⁷

According to reports, “approximately 40 percent of post-aborted women were still hoping to discover some alternative to abortion when going for counseling at the abortion clinic.”¹⁸ Moreover, the negative effects of abortion upon a woman’s physical and mental health after abortion have now been documented extensively.

The Supreme Court has previously and repeatedly recognized, “Abortion is inherently different from other medical procedures, because no other procedure involves the purposeful termination of

¹⁴ Priscilla K. Coleman, Ph.D., et al., *Women Who Suffered Emotionally from Abortion: A Qualitative Synthesis of Their Experiences*, JOURNAL OF AMERICAN PHYSICIANS & SURGEONS, Vol. 22 No. 4, p. 115 (2017), available at <https://www.jpands.org/vol22no4/coleman.pdf>.

¹⁵ *Id.*

¹⁶ *Id.* at 116-17.

¹⁷ *Casey*, 505 U.S. at 877; reaffirmed in *Gonzales*, 550 U.S. at 146.

¹⁸ David C. Reardon, *Informed Consent: The Abortion Industry’s Achilles’ Heel*, ELLIOT INSTITUTE, http://www.afterabortion.org/PAR/V2/n2/INCONSNT.htm#N_34_.

a potential life.” *Harris v. McRae*, 448 U.S. 297, 325 (1980). This is important to note, as it highlights the significance of ensuring that women are fully informed about abortion procedures and their consequences.

CONCLUSION

As stated above, full and complete disclosure of all options and all facts is what creates choice. Failure to fully inform a woman of all the facts of and alternatives to abortion leads to compulsion, and H.B. 1317 is an important step in ensuring that women are fully informed and are exercising true choice.

In short, for the reasons stated above, the ACLJ supports the proposed bill, and it should be upheld as valid under the U.S. and Maryland constitutions.