

**Favorable Statement HB885**

Criminal Law – Causing Ingestion of an Abortion-Inducing Drug –Prohibition  
(Women’s Freedom From Coercion Act)  
Deborah Brocato, Retired Registered Nurse

**As a retired registered nurse, I am strongly in favor of HB885.** I am also a former volunteer of over 8 years at a pregnancy resource center.

As a volunteer at a pregnancy resource center on the Baltimore City – Baltimore County line, I saw many clients from the city. The majority of these young women were black. There was a disparate effect on black women who were poor with little to no support. While they were at the center for support of a current pregnancy, many of these young women had stories of forced abortion of a prior pregnancy. These young ladies lost their freedom to choose when their boyfriends and family members threatened abandonment of any type of support, including financial and housing, if they continued their pregnancies. Boyfriends used actual physical abuse and/or threatened physical abuse to force abortion. Safeguards for access to abortion pills have been removed which makes it easier for persons with ill intentions to obtain those drugs and use them against unsuspecting pregnant woman. These women need to know there is legal recourse against secret or forced ingestion of abortion-causing drugs.

The Maryland Constitution now includes the Reproductive Freedom Amendment. The amendment protects the right for a woman to obtain an abortion, but it also protects a woman’s right to continue a pregnancy. Violating a right delineated in the Maryland Constitution merits special recognition. This intimate attack on a woman needs to have a unique designation in the criminal code and an appropriate penalty to provide justice for the violation of her rights and her body. HB885 will recognize an assault that targets a specific group, namely women who are pregnant.

The abuser puts the lives of both the baby and the mother in jeopardy. The abuser who would secretly give a woman these drugs certainly doesn’t care about the contraindications and risks associated with these drugs. See the attached article from the Ethics and Public Policy Center - “One in ten patients experiences a serious adverse event.” Those are the statistics from women who knowingly took the abortion pills. Those numbers do not include women who did not report the adverse events and, certainly, not the women who were secretly given the drugs. Adverse events include serious injury such as sepsis, hemorrhaging, infertility and death. The woman could not only lose the baby she currently carries but the ability to have any future children.

The two drugs used for chemical abortion are mifepristone and misoprostol. When used together, mifepristone is given first to cause the breakdown of the uterine lining and separate the placenta from the uterine wall causing fetal death. Then, misoprostol is given to cause contractions to expel the fetal remains. Bleeding can continue for several weeks.

Misoprostol can also be used alone to cause abortion. Used alone, misoprostol is taken in several doses dissolved in the mouth or in the vagina. Again, misoprostol causes contractions to bring on the abortion. Bleeding can continue for several weeks.

The FDA recommends use of mifepristone and/or misoprostol only through 10 weeks of pregnancy. Risks for failure of complete abortion and adverse events increase with greater gestational age. Those risks include hemorrhage and infection. Hemorrhage can lead to respiratory compromise, heart attack and death. Infection can lead to sepsis and death. See the attached articles from the National Institute of Health and the Charlotte Lozier Institute.

Misoprostol is also prescribed to treat gastrointestinal ulcers and to complete a naturally-occurring miscarriage.

Maryland allows prescriptions via telehealth including for mifepristone and misoprostol. While telehealth has given increased access to women, it provides a loophole for abusers. An in-person exam is not required; therefore, it's possible the person asking for the prescription could use it on some other woman. Because misoprostol is used to treat ulcers, a man could obtain this prescription and use it against a woman.

The person seeking to cause an abortion without the woman's knowledge likely uses Misoprostol alone, crushes the pills and puts them in her food and drink. Giving her these pills all at once not only will cause extreme pain from the contractions but increase the likelihood of adverse events. It is likely the abuser will use the drugs without concern for the gestational age of the pregnancy or any other possible coexisting condition of the woman, such as ectopic pregnancy, high blood pressure, bleeding disorders, etc., that would increase the risks up to and including death.

Because the pills resemble Tylenol, the abuser could also trick the pregnant woman into taking them for pain or headache and give them to her over several doses.

Without knowing she has ingested abortion-inducing drugs, the woman will think she is having a natural miscarriage. Going to an emergency room, this means she will not be able to give complete information about her condition.

HB885 could help to deter this abuse and provide a path to justice for the victims of this coercion.

I urge you to recognize this unique assault on women and protect a woman's right to exercise her Maryland Constitutional right to continue her pregnancy and protect her from abuse. **I strongly recommend a favorable report for HB885.**