



## Abortion Barriers in the 2011-2012 Legislature:

### *A Threat to the Health and Well-being of Women and their Families*

Emboldened by legislative victories in states such as Nebraska and Oklahoma and energized by a handful of pick-ups in the 2010 election, anti-choice groups filed a host of new bills this session – including bans on abortion. These bills are designed to directly interfere with private medical decisions best left to a woman and her family, in consultation with her doctor.

Filled with pseudo-scientific language and quasi-medical jargon, these anti-choice measures were written in such a way as to obscure their true aims and to confuse the public. They turn a blind eye to the particular circumstances of a woman's pregnancy and, if passed, would radically alter a woman's ability to make decisions about her pregnancy in the Commonwealth. For these reasons, NARAL Pro-Choice Massachusetts opposes this extreme package of abortion barriers.

- **Banning safe, medically appropriate abortion methods (H 1333):** Using convoluted and confusing terminology, a proposed ban on so-called “partial-birth abortion” sponsored by Reps. Kuros and Poirier would make it a crime for a doctor to perform certain types of abortion procedures after the first trimester. The bill provides no exception to protect a woman's health; in fact, the doctor would not even be allowed to prioritize saving the woman's life— making this much farther reaching than the federal abortion ban. If enacted, this state abortion ban would put a doctor in the impossible position – both before *and possibly even during* surgery – of deciding between protecting his or her patient and facing criminal charges or ignoring the woman's health in order to comply with the law. Such bans are widely opposed by the nation's leading medical and public health organizations – including the American College of Obstetricians and Gynecologists and the American Public Health Association<sup>1</sup> – because they hinder a doctor's ability to provide the best, most appropriate medical care to their patients.
- **Using junk science to promote politics over women's health (H 3295):** As part of the anti-choice campaign to eliminate a woman's access to abortion, this bill would force physicians to substitute state mandates based on unproven theories – instead of medical standards and their own medical judgment – in order to perform an abortion midway through pregnancy. This bill would take its greatest toll on women facing dire situations, including complications during pregnancy. Only 1.5% of abortions occur after 20 weeks,<sup>[i]</sup> when this measure would apply, and current Massachusetts law bans abortions after 24 weeks unless a woman's life or health is at risk. If this were to pass, it would interfere with a woman's ability to make medical decisions about her pregnancy and could jeopardize the health and well-being of pregnant women in the Commonwealth.
- **Exploiting concerns about gender-based discrimination to ban abortion (H 484):** A second abortion ban, sponsored by Rep. Poirier, purports to outlaw terminating a pregnancy if it is believed that a woman is doing so for “sex selection.” While some women may face pressure from family members or their community to have a child of a particular sex, banning abortion will not solve the deeply rooted problem of gender bias. Rather, it would put politicians in a position of second-guessing a pregnant woman's medical decisions and give prosecutors the power to threaten doctors with criminal charges for providing safe, legal medical care.

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<sup>1</sup> ACOG Statement of Policy, *Statement on Intact Dilatation and Extraction* (July 12, 1997); Letter from Fernando M. Trevino, Executive Director, American Public Health Association, to President Clinton, The White House (Mar. 4, 1996).

<sup>[i]</sup> Guttmacher Institute, *In Brief: Facts on Induced Abortion in the United States*, January 2011 at [http://www.guttmacher.org/pubs/fb\\_induced\\_abortion.html](http://www.guttmacher.org/pubs/fb_induced_abortion.html) (January 31, 2011).