

A Statement by  
Teresa McCann-Tumidajski, Executive Director  
Maine Right to Life Committee  
Before the Joint Judiciary Committee, May 3, 2011  
**On LD 924, “An Act to Educate Women on the Medical Risks Associated with Abortion”**  
**EMPOWER ME WOMEN**

Good afternoon. My name is Teresa McCann-Tumidajski, and I am Executive Director of Maine Right to Life Committee. On behalf of Maine Right to Life, I am here in support of

LD 924, An Act To Educate Women on the Medical Risks Associated with Abortion;  
LD 116, An Act To Require a 24-hour Waiting Period prior to an Abortion; and  
LD 1457, An Act To Strengthen the Consent Laws for Abortions Performed on Minors and Incapacitated Persons

Today I will address my comments specifically in support of LD 924 which is a pro-woman, pro-information, and pro-common sense bill. On behalf of our membership, we thank Representative Espling, along with each of the 27 co-sponsors for bringing this important legislation forward.

We know that just because something is legal and readily available throughout the country for purchase, does not mean that it is safe or even healthy. Consider smoking...How many years/decades did big tobacco fight to suppress any studies or research exposing the real dangers of smoking, much less the dangerous effects of second-hand smoke? How long and arduous was that battle? Perhaps some of you may remember the Virginia Slims cigarette ad campaign aimed at women, “You’ve come a long way, baby.”

It seems to me that women have not come so far as the feminist movement promised us nor the tobacco companies touted. Today, women still only earn 77 cents of every dollar earned by a man doing the same job. And here we are, in 2011, petitioning for a women’s *Right to Know* legislation concerning their own pregnancies, options, services, and future health.

After 38 years and over 53 million abortions, we have learned that for far too many women, abortion has been a hollow right through which they and their unborn child have been wronged by a lack of pre-abortion counseling, coercion by others and lack of true fetal development information.

We now have countless studies showing the inherent risks of abortion including depression, suicide, anxiety, chronic relationship problems, post traumatic stress disorder and the like. Two national records-based studies from Finland indicate that aborting women were 6 times more likely to commit suicide in the following year than were delivering women. (1)

We know that since 1957, 23 of 37 worldwide studies show an increased breast cancer risk with abortion, a risk as high as 310 percent, and that ten of 15 U.S. studies confirm the abortion-breast cancer link. (2)

Elective, legal abortion can also lead to long term reproductive damage including miscarriage, premature births, sterility and even death for the mother. The risk of sterility is greater for women who have a venereal disease at the time of the abortion (3).

The 2008 figures from Maine CDC indicate that almost 40 percent of all abortions in Maine are repeat abortions; meaning the woman has had one, two or three prior abortions. These women deserve to be informed that repeat abortions can increase their risks of sterility, miscarriage, and other health risks with each abortion chosen. (4)

When a woman is facing an unplanned pregnancy, she is often at her most vulnerable. Unfortunately, this is also a time when many women feel coerced by boyfriends, husbands, bosses, abortion clinician staff, and family

members into making a choice which may not really be her choice at all. A study conducted by VM Rue et al (5) found that:

64% of American women felt pressured by others  
More than half felt rushed or uncertain, and yet 67% received no counseling  
79% were not told of alternatives and  
a whopping 84% said they were not fully informed.

The United Nations Population Fund stated that coerced abortion is explicitly recognized as a violation of basic rights and principles. (6)

We know that omission is a form of coercion when information is deliberately withheld to ensure the will or choice of another person or party upon another. It's true that coercion takes on many faces and forms. Today you will hear powerful first-hand testimony from courageous post-abortive women who have been on the front lines of the reproductive rights movement. These valiant women will publically share their story (some for the very first time) with you this afternoon, asking that you support LD 924. Each woman's painful journey has a recurring theme, "IF I HAD ONLY KNOWN." Unfortunately, there is no reset button with abortion. Their choice was one in which the truth was often omitted, or their so-called choice was uninformed, rushed or relinquished to others out of fear or by manipulation.

*Since when has the disclosure of medical information been considered an infringement of women's rights?*

And why would requiring one day to discern a life-altering decision be considered an undue hardship? It really makes no sense whatsoever. Don't let rhetoric cloud your common sense for enacting good legislation for Maine.

For instance, we often hear of the sacred bond between a woman and her doctor regarding reproductive rights. In fact, for many women, that bond is often absent when it comes to abortion because for many women, the first and last time they ever see the abortion provider is on the very day of the abortion. Maine women deserve to know the name of their abortion provider in advance, and LD 924 does include that provision. Women should be able to vet their abortion provider, just as they would any other doctor providing an elective medical procedure.

**A woman's medical *Right to Know* should be enhanced in the 21st century, and never restricted or denied by any group, organization or individual purporting to support women.** Don't let politics or profits put any woman's health or life at risk. Passage of LD 924 will not restrict abortion access, but it will empower Maine women to make more informed and reflective decisions concerning their pregnancies.

If we can save ONE WOMAN from a life time of regret and suffering concerning a rushed and uninformed choice...it is worth this legislation. Well worth it. Vote LD 924 "ought to pass." Empower Maine women.

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## End Notes/Citations/References

1. Gissler, Hemminki & Lonnqvst, "Suicides after pregnancy in Finland, 1987-94: register linkage study," *British Journal of Medicine* 313:1431-4,1966; and M. Gissler, "Injury deaths, suicides and homicides associated with pregnancy, Finland 1987-2000," *European J. Public Health* (15(5):459-63,2005.
2. *Women's Health after Abortion*, DeVeber Chapter 2, Daling JR, Malone KE, Voight LF, White E, Weiss NS, Risk of breast cancer among young women: relationship to induced abortion. *Journal of the National Cancer Institute* 1994 Nov (2); 86(21): 1584-92.
3. J.C. Willke, *Abortion: Questions and Answers* (Cincinnati, Hayes Publishing Co., 1985)
4. A. Levin, et al, "Association of Induced Abortions with Subsequent Pregnancy Loss," *Journal of American Medical Association*, Vol. 243, No. 24 (June 27, 1980) pp 2495-2496, 2498-2499.  
<http://www.nrlc.orgabortionASM/asm16.html>
5. VM Rue et al: "*Induced abortions and traumatic stress: A preliminary comparison of American and Russian women*," *Medical Science Monitor* 10 (10) SR 5-16 (2004)
6. United Nations Population Fund

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