

Bills before Legislature to mandate abortion stat collection, prohibit late abortions

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ANNAPOLIS – Maryland does not know its teen pregnancy rate. It's a fact that confounds Nancy Paltell, associate director for respect life at the Maryland Catholic Conference (MCC).

The teen pregnancy rate is calculated by adding teen births, miscarriages and abortions, and the state does not collect abortion statistics. The statistics are also necessary for the state to assess the effectiveness of state-funded programs to reduce unwanted pregnancies or births, or identify abortion trends.

Paltell addressed the issue March 20 in testimony before the Senate Finance committee. The committee heard arguments on three abortion-related bills – one to require abortion statistic reporting; one to prohibit abortion illegal after 20 weeks, when a fetus can feel pain; and another to require abortion-providers to make available an ultrasound for patients seeking an abortion.

The MCC, which advocates for public policy on behalf of the state's bishops, testified in support of the Abortion Survey System bill and the Pain Capable Unborn Child Protection Act.

Maryland is one of four states that do not mandate state reporting on abortion statistics. The others are California, Delaware and New Hampshire.

The Centers for Disease Control (CDC) requests abortion data from each state and the District of Columbia and New York City for its annual Abortion Surveillance Report, but reporting is voluntary.

According to the CDC website, there is no national requirement for abortion data submission or reporting. However, the agency provides a template with suggested areas of data collection, including age of woman, gestational age of the fetus, race, ethnicity, abortion method, marital status, number of previous live births, number of previous abortions, and state where the woman resides.

The data is used to identify women who are at risk of an unintended pregnancy, evaluate effectiveness of programs for reducing teen pregnancies and unintended

pregnancies, calculate pregnancy rates and monitor changes in abortion practice patterns, according to the CDC.

The bill recommends that the data is submitted through electronic reporting, reducing the cost to the state.

"This is not going to be a lot of work for the (Maryland) Department of Health," Paltell said.

Representatives of Maryland Right to Life also testified in support of the bills. Jeffrey Meister, the organization's director of administration and legislation, said that Maryland has become a "hub" for late-term abortions due to the lack of protective laws.

"Is this really the reputation for which we want Maryland to be known?" he asked.

Others testified to the science establishing that a fetus can experience pain at 20 weeks after fertilization.

Testifying in opposition were representatives from Planned Parenthood of Maryland, NARAL Pro-Choice Maryland and the American Civil Liberties Union of Maryland.

Opponents argued that the data collection bill could compromise patient and provider privacy, and cause a rift between the doctor and patient.

On the fetal pain bill, opponents argued that the bill would make it difficult for a woman to abort should she learn that her fetus is disabled and wishes to end the pregnancy.

Rockville-based psychologist Julie Bindeman shared her experience of choosing to abort two pregnancies after discovering the fetuses had brain developmental abnormalities.

"Each (medical) specialist confirmed the horrible news - that our best-case scenario, if this baby even survived to term, was that our son would have the developmental ability of a two-month old. He wouldn't walk, crawl, speak, anything," she said while describing the first child's prognosis. "We decided to end the pregnancy."

Bindeman's testimony stood as a stark contrast to earlier testimony in support of the fetal pain bill from Berlin, Md.-resident Mariratina Quillen. Quillen's daughter, Shirley Grace, was diagnosed at 20-weeks gestation with an extreme case of Dandy Walker Malformation and hydrocephalus, resulting in the absence of 90 percent of her brain. The child was not expected to live long outside the womb.

The Quillens decided to continue with the pregnancy rather than abort, and their daughter lived for three weeks after birth.

"I am here to tell you today that although there is grief, there are no regrets," Quillen said. "Amidst the pain were beautiful memories - memories abortion could never offer me. Memories that are in my heart no matter how empty my arms are."

Members of the House of Delegates heard testimony on the bills March 15.

The Alan Guttmacher Institute, a former research arm of Planned Parenthood,

estimates that Maryland has the fourth highest abortion rate in the country, with more than one in four pregnancies ending in abortion.

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