



Targeted Regulation of Abortion Providers (TRAP)

OPPOSE HB670 and HB894

WHILE TRAP LAWS MAY SEEM INNOCUOUS OR WELL-MEANING AT FIRST GLANCE, THEY SEVERELY THREATEN WOMEN'S ABILITY TO CHOOSE AN ABORTION IN A NUMBER OF WAYS.

First, by treating abortion differently from all other comparable medical procedures and subjecting it to a unique level of micro-management and governmental oversight, TRAP laws segregate abortion providers and patients from the rest of medical practice and relegate abortion services to a status below other health care.

Second, by subjecting abortion providers to criminal and civil penalties, exposing them to harassment, and intruding significantly into their practice of medicine, TRAP laws deter physicians from becoming or remaining abortion providers. Thus, TRAP laws threaten to reduce the number of abortion providers, particularly in private practices, resulting in less access for women to abortion services.

Third, by imposing requirements that significantly raise the cost of providing abortions, TRAP laws increase abortion prices, causing some women to delay or even forego desired abortions.

Fourth, by imposing medically unnecessary, and at times inappropriate, requirements on abortion provision, TRAP laws interfere with physicians' ability to exercise their medical judgment in the best interests of their patients.

TRAP LAWS POSE UNNECESSARY AND BURDENSOME REGULATIONS ON ABORTION PROVIDERS.

- Legal abortion is a safe medical procedure. Legal abortion care entails half the risk of death involved in a tonsillectomy and one-hundredth the risk of death involved in an appendectomy.¹ The risk of death from abortion is lower than that from a shot of penicillin.²
- Physician's offices providing abortion are already regulated by state and federal agencies. They also meet licensing standards similar to offices where other medical procedures are provided, such as plastic or oral surgery.
- The architectural, procedural, staffing, and equipment requirements of ambulatory surgery centers are unrelated to providing safe first-trimester abortion services.
- The cost of complying with these unnecessary and burdensome requirements is between \$1.5 and \$2.0 million. Two clinics in the state have retrofitted their offices to comply with these regulations; the rest would most likely be forced to close.

¹ Warren M. Hern, ABORTION PRACTICE 23-24 (1984).

² Nancy Felipe Russo, *Unwanted Childbearing, Abortion, and Women's Mental Health: Research Findings, Policy Implications*, ROCKY MOUNTAIN PSYCH. 9 (1992).