

Testimony of Kristyn Brandi, MD, MPH, FACOG
Senate Committee on Health, Education, Labor & Pensions
Reproductive Care in a Post-Roe America:
Barriers, Challenges, and Threats to Women's Health
July 13, 2022

Good morning, Chairwoman Murray, Ranking Member Burr, and distinguished members of the committee. My name is Dr. Kristyn Brandi I use she/her pronouns, and I am the Board Chair of Physicians for Reproductive Health. I am a board-certified OBGYN and have received fellowship training in the subspecialty of complex family planning. I have been providing comprehensive reproductive health care for over a decade including abortion care, prenatal care, gynecologic procedures and outpatient gynecologic care. I am a proud abortion provider from the state of New Jersey.

I became an abortion provider for the same reason that I became an OBGYN – to help historically oppressed folx access the care that they need and deserve. Obstetrics care has always been stigmatized and marginalized. It is no surprise to me that the same places that have banned abortion also have the highest rates of maternal mortality, and there are many systemic and social factors that play into these rates. I remember taking care of a patient with a desired pregnancy at 17 weeks whose fetus had not developed a brain. She decided that instead of continuing that pregnancy to term she would end her pregnancy and end what she thought was her suffering and that of her potential child. Her decision had become so stigmatized that I remember the staff did not want to enter her room. We had to call in another nurse to make sure we had enough staff to take care of her. I knew then that my career would be dedicated to ensuring no patient is shunned or shamed for making the best medical decision for them and their family. I knew that by being a full spectrum OBGYN, providing abortion care and prenatal care, I could provide the best care for my patient regardless of what they needed from me.

I'm here today to make clear that abortion is essential health care. Abortion can be necessary to save someone's life. It is a critical part of being an ob-gyn. National medical organizations including the American Medical Association unanimously have expressed outrage at *the Dobbs v. Jackson Women's Health* decision. The American College of Obstetricians and Gynecologists (ACOG) said in their statement about *Dobbs* "Abortion is a safe, essential part of comprehensive health care, and just like any other safe and effective medical intervention, it must be available equitably to people, no matter their race, socioeconomic status, or where they reside... Allowing states to set individual restrictive abortion policies, including restrictions and outright bans on this essential component of medical care, results in an increase in the inequities that already plague the health care system and this country." The National Academies of Sciences, Engineering, and Medicine put out a comprehensive report in 2019 looking at abortion outcomes and found that abortion care has one the highest safety records of all procedures in medicine. We know that in the United States you are 14 times more likely to die in natural childbirth than you are to die of an abortion. And we know from the Turnaway Study from the University of California at San Francisco that people denied access to abortion have a higher chance of facing poverty and having worse health outcomes in the future compared to patients that were able to access a desired abortion.

I am a pro-abortion doctor. I say pro-abortion not to be antagonistic, but to point out all of the good that abortion can provide for people. I have taken care of many people with desired pregnancies in which their abortion was a sad event for them. But without autonomy, without decision-making ability, without access to abortion care, there is a chance that those situations could have been even more painful or more life-threatening. And for those that do not want to be pregnant for any reason, the ability to have an abortion gives them the freedom to decide if and when to become pregnant. To have a planned pregnancy, or not, in a time that works best for them emotionally, financially, and based on their health. Abortion is liberation for some. There is a lot of good that comes from people's ability to access abortion and I want to celebrate that.

I believe firmly in the tenets of reproductive justice – that all patients have the human right to be able to choose if and when to become pregnant and to parent children in safe and sustainable communities. I cannot separate my ability to provide care as a physician from my lived experiences. I am a cis-gender woman who could be harmed by restrictive abortion bans if I happened to live in a state different than my own. I am also a Latina – the daughter of Puerto Rican and Panamanian parents. I identify as a bisexual woman and proud member of the LGBTQ+ community – a community also in deep need of timely, compassionate reproductive health care. So, I also understand deeply how restrictions on abortion and outright abortion bans impact marginalized communities because they are my community.

People with low incomes, BIPOC (Black, Indigenous and people of color) folx, LGBTQ+ people, people with disabilities, young people, people facing incarceration/detention, and immigrants, who faced many barriers to accessing care even before *Roe* was overturned, now face even bigger hurdles. After the recent Supreme Court decision, people watched as their ability to access health care changed overnight. People were able to get care the day before the decision and the next day, depending on their zip code, their access to abortion care was gone. My biggest fear is that these people are not going to find care and will be forced to continue their pregnancies, putting their health, well-being, and security at risk. Communities of color, particularly Black women, are already at risk of high rates of maternal mortality – withholding access to abortion care will only make this dire situation worse.

I want this Committee to understand the far-reaching ripple effects of abortion bans. I remember having a patient with a ruptured ectopic pregnancy, who was talking to me in the ER quickly as we were rushing her to the operating room for surgery. It took us only 10 minutes or so from meeting her to starting her surgery. Just before we began, her blood pressure suddenly dropped dramatically – she was dying. We rushed to complete her procedure safely, finding several liters of blood in her belly along with a ruptured fallopian tube which held her 7-week pregnancy. I am so glad she came to the hospital when she did, that we identified this ectopic pregnancy so quickly, and that we were able to intervene before it was too late. In urgent situations, medical professionals need to be able to make quick decisions about the best course of care. Those seconds can make the difference in preventing life-long impacts for a person's health or whether someone survives. We have heard people question whether bans on abortion will impact care like ectopic pregnancy management even when they shouldn't or whether bans on abortion will impact care such as in vitro fertilization (IVF). Or if miscarriage management will be allowed,

which uses the same medicines and procedures as abortion care. Each pregnancy is unique and as providers we need to be able to individualize care to the person in front of us.

I am greatly concerned that bans on abortion will tie health professionals' hands when it comes to providing evidence-based, quality, safe care to patients. It is heartbreaking to consider that the skills that I have, that I can physically provide, the medicine that has been proven time and again to be incredibly safe, will be barred from patients. As a doctor, I took an oath to care for my patients. I am beholden to four tenets of medical ethics – beneficence, non-maleficence, autonomy, and justice. We are supposed to bring safe evidence-based care to our patients. It is unconscionable to enact laws that prevent health care providers from offering the standard of care. There are many reasons why people need abortions. And there are many urgent health conditions that can arise from or be exacerbated by pregnancy for which abortion is indicated. There are already reports of having to wait for a patient to become sicker before intervening. Future health care providers may not have access to training to even learn how to provide abortion care and will be ill equipped to act in complex situations. This is not how health care should work. People will be harmed when they cannot access essential abortion care.

This is truly a health care crisis on top of another health care crisis. During the COVID-19 pandemic, we saw historic losses of nurses, doctors, support staff within health care because of burnout and death from COVID-19. Bans on abortion are going to have widespread repercussions. There are already not enough health care providers. There are already not enough hospitals with labor and delivery wards. Health care providers will be wary of joining communities where they cannot provide the standard of care. For states where abortion is still available, some clinics have weeks long waiting times. In pregnancy care, delays can mean that people will not be able to get abortion care. Our health care system was already struggling, and we have now added another unjust load to bear.

This moment is horrifying. I am frightened for patients that may be criminalized for making valid decisions about their health; I am concerned for health professionals committed to providing high quality evidence-based health care; I am terrified for the people that will be forced to continue an undesired pregnancy against their will. But I will not give up. I provided care last week and I will provide care next week and I will do it again the week after that. I won't give up because I know how important it is for my patients to have the care they need, when they need it, in the community they live in. Please remember that there are countless people in each of your states that have needed and benefited from abortion. You all love someone who has had an abortion. They deserve your consideration and protection. Thank you.