

Massachusetts Public University Medication Abortion Bill Stirs Debate

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State House News Service

Public universities in Massachusetts would be required to provide medication abortion options to students and offer referrals for abortion care services not provided in their health centers under legislation advocates said would help promote equity and increase the number of students who graduate.

The bill (H 2399 / S 1470), filed by Rep. Lindsay Sabadosa and Sen. Jason Lewis, would establish a fund administered by the Department of Public Health and Department of Higher Education to help cover the costs of the medication abortion options like abortion pills.

The Department of Public Health would use the fund to provide grants of no less than \$200,000 to each public university health center to pay for the cost, "both direct and indirect, of medical abortion readiness," according to the bill.

The legislation would also require DPH to submit a yearly report detailing the number of colleges or universities that operate health centers and the number of medical abortions provided at those centers, among other things.

Smith College Women and Gender Professor Carrie Baker is researching the burden students face as a result of having to travel off-campus for medication abortion services. According to Baker's research, between 40 and 64 public university students in the state obtain medication abortions each month which equals out to about 480 to 768 each year.

She also identified the nearest abortion clinic to each of the 13 public university campuses and then calculated the distance and travel times by public transportation. Baker said she found that students often travel between two and 42 miles to obtain medication abortion services, a process that she said can take hours out of a day.

“People who give birth while in college are less likely to graduate than those who do not and 89 percent of students say that having a child while in school would make it harder to achieve their goals,” she said, referring to her research. “Abortion using medication is a safe, effective non-surgical method of ending a pregnancy in the first 10 weeks that could easily be provided in university health centers, but it’s currently not available there.”

Debby Dugan, a member of the Republican State Committee, spoke in opposition to the legislation, calling abortion a “promised escape” that “enslaves the mothers, the fathers, and anyone who’s involved in the process.”

“It enslaves them to a lifetime of shame and guilt,” said Dugan, who noted that she has previously served at crisis pregnancy centers and taught abstinence to middle schoolers. “I beseech you not to do this. As a Christian woman, I believe each and every one of us will be held accountable for our actions. And you ladies and gentlemen, also will be held accountable for your actions today.”

Dr. Mark Rollo, a family physician from Fitchburg, cited risks medication abortion options pose to people who use them while speaking in opposition to the bill.

“I want you to imagine a daughter of yours being sent off to college, only to learn that the school is an adjunct to places like Planned Parenthood,” he said during the hearing. “I am sickened by the thought of a young woman hemorrhaging while she sits on the toilet in a college dormitory or looking into

the toilet to see a fully formed fetus about to be flushed.”

Sen. Becca Rausch, a cosponsor of the legislation, fired back at Rollo and Dugan for what she said were “numerous patently false statements” and “medically inaccurate language.”

“Medication abortion is very safe. It has a safety record of over 99 percent, which is safer than over-the-counter painkillers,” the Needham Democrat said. Rausch also pushed back on crisis pregnancy centers, calling them “fake women’s health centers.”

“By and large, fake women’s health centers are anti-choice hotspots that disguise themselves as reproductive health care providers to trick people seeking abortion into entering their facilities, only to then actively discourage individuals seeking medical care from getting the care they both want and deserve,” she said.

Max Montana, a Boston College junior who serves as co-president of the BC Pro-Life Club, said he wanted to speak against the bill to make sure “campuses do not become unsafe places for pregnant women.”

“Public universities are not hospitals and their health and general staff are not equipped to handle this extreme change,” he said. “...Assuming this program will facilitate well over 20 medical abortions on these college campuses, this will mean universities and their personnel will have to find solutions to time sensitive, dangerous and, according to the FDA, sometimes deadly situations.”

Rausch again jumped into the conversation to push back against Montana and several of his colleagues from Boston College who spoke after him.

“In addition to those young men who testified from BC, I feel compelled to inform you that the bill before us has absolutely nothing to do with your school, which is a private school.

This is a bill about public universities," she said. "And to that same extent, related extent, colleges are already health clinics. In fact, that's kind of the point that we're talking about."