



Senator Carney, Representative Kuhn, and members of the Joint Standing Committee on the Judiciary, my name is Lisa Margulies, I serve as Vice President of Public Affairs, Maine, for Planned Parenthood of Northern New England, and I am here today to submit testimony in opposition to LD 492.

Planned Parenthood of Northern New England provides comprehensive reproductive and sexual health care in approximately 10,000 visits per year in Maine at four health centers located in Biddeford, Portland, Sanford, and Topsham, as well as online via telehealth. People turn to us for affordable, high-quality care including wellness exams, birth control, disease testing and treatment, cancer screenings, abortion care, gender-affirming care, as well as a variety of primary care services.

As a mission driven health care provider, we fundamentally believe everyone should be able to access affordable, high quality sexual and reproductive health care in their communities, no matter where they live or how much money they make, and we advocate for policies that help make this vision a reality. All people deserve to access comprehensive reproductive health care, including abortion and gender-affirming care, free from shame, stigma, and intimidation. We see everyone who comes to us regardless of ability to pay, and in a typical year, we provide more than \$1.2 million in free and discounted care to our communities in Maine. For many, we are their only access to the health care system.

This proposed constitutional amendment would strip young people of their ability to participate in decision making in all aspects of their lives, including upbringing, education, and care. This testimony speaks to its impact on a narrow but extremely timely area: access to health care, specifically access to sexual and reproductive health care of one's choosing.

It is critically important that young people be able to access care, information, and resources about their health and their bodies. They deserve confidential care and support from trusted adults - not barriers and delays. This bill will prevent young people from accessing crucial health care, including treatment for sexually transmitted infections and contraception, and other safe, routine treatments necessary to ensure young people's well-being. By denying young people the right to make their own medical decisions, LD 492 represents a dangerous break from more than three decades of established law and medical practice in Maine. If implemented, LD 492 would prohibit or conflict with existing law for minors to consent for behavioral and reproductive health services, blood donation, and even services related to sexual assault.

For decades, Maine has recognized and accounted for the fact that young people are more likely to access the sexual and reproductive health care they need, when they need it, if they trust that the care will be confidential and without state interference. In particular, Maine's current adult involvement law has encouraged family involvement in a young person's



decision to seek abortion, while providing those who cannot involve a parent with guidance and support by trained professionals.

We all want young people to be able to reach out to trusted adults for support and guidance, and we know that help from a loved one can ensure that a young person stays safe. But parental involvement laws discourage and prevent young people from seeking help and can put young people at even greater risk.¹

Young people who have a supportive relationship with their parents are likely to consult them about an important medical decision, but those who do not disclose health care decision-making to parents have a good reason.² For young people living in abusive households, disclosing sexual activity or pregnancy can trigger physical or emotional abuse, including direct physical or sexual violence, or being thrown out of the home.³ The risks of abuse are especially acute for queer and trans youth. One study found that of the young people who do not seek advice from parents, nearly half—forty-five percent—experience significant negative consequences when a parent finds out about pregnancy, from punishment to abuse to being forced to leave the home.⁴ Rather than helping young people, parental involvement laws create an environment that makes young people less likely to seek the care they need.

The outcome of such an approach would put people's health at risk. We want young people to have health care, information and resources, not barriers and delays. We want them to have the support and resources to make important decisions that are best for their health, lives, and future opportunities and to be able to decide who to seek out for support and guidance to be safe, healthy, and affirmed. It is for all these reasons that I urge you to vote ought not to pass on LD 492.

¹ Expert Report of Dr. Suzanne Pinto, *Planned Parenthood of Mont. v. State of Montana*, No. BDV-2013-407 (March 24, 2015).

² Expert Report of Bonnie Halpern-Felsher, PhD, *Planned Parenthood of Mont. v. State of Montana*, No. BDV-2013-407, P27 (March 24, 2016) (citing Laura L. Finken, *The Role of Consultants in Adolescents' Decision Making: A Focus on Abortion Decisions* 255 *The Development of Judgment and Decision Making in Children and Adolescents* (Janis Jacobs & Paul Klaczynski eds., 2005)).

³ Expert Report of Dr. Suzanne Pinto, *Planned Parenthood of Mont. v. State of Montana*, No. BDV-2013-407 (March 24, 2015).

⁴ Expert Report of Bonnie Halpern-Felsher, PhD, *Planned Parenthood of Mont. v. State of Montana*, No. BDV-2013-407, P27 (March 24, 2016) (citing Laura L. Finken, *The Role of Consultants in Adolescents' Decision Making: A Focus on Abortion Decisions* 255 *The Development of Judgment and Decision Making in Children and Adolescents* (Janis Jacobs & Paul Klaczynski eds., 2005)).