



Prepared Remarks
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Good morning, Chairman Watson and members of the committee. My name is Nneka Ewulonu and my pronouns are they/them. I am a staff attorney with the ACLU of Georgia. The ACLU of Georgia opposes SB 456 because it creates more obstacles to abortion care while doing nothing to promote patient safety.

Medication abortion is safe and effective. Since it was first approved by the FDA in 2000, it has amassed a 99% safety rate. These medications are so safe, that the FDA recently eliminated a requirement that the medications be dispensed in-person, removing a major obstacle to patient access. This bill – part of a national antiabortion strategy that mirrors bills in other state legislatures -- seeks to undo that progress.

A 2018 report from the National Academies of Science, Engineering, and Medicine found that the risk of adverse outcomes from medication abortions were “both low and similar in magnitude” to the risks of “commonly used prescription and over-the-counter medications.” Medications used for abortion are safer than common pain medicines like Tylenol. In the FDA’s own words, medication abortion’s safety and efficacy are “well-established.”

As the American College of Obstetrics and Gynecology has found, medication abortion and the use of telemedicine for abortion care is safe, effective, and facilitates access to essential healthcare. SB 456 is a baseless attempt to block access to that care by placing it in a different legal framework than almost every other medication. Furthermore, the bill’s prohibition on mailing abortion pills is in direct conflict with the FDA’s 2021 changes. While SB 456 claims to promote patient health and safety, it instead singles out medication abortion for unmerited governmental regulation based on unfounded allegations.

In the case *Whole Woman’s Health v. Hellerstedt*, the Supreme Court affirmed the undue burden standard, requiring restrictions that impose a substantial obstacle to abortion access to be justified by some corresponding benefit to patients. No such benefit exists here. SB 456 represents a needless and undue burden on an individual’s access to medication abortion. These restrictions are therefore unconstitutional.

As with all abortion restrictions, restrictions on medication abortion fall hardest on those who already face barriers to accessing health care, including low-income people, people of color, undocumented immigrants, LGBTQ+ folks, young people, and those who live in rural areas. These barriers would create an undue burden on access to abortion care in violation of current federal constitutional protections for the right to privacy.



Medical care should be guided by a patient's health and well-being, not politics. The evidence is clear: medication abortion is safe and effective. SB 456 is contrary to longstanding medical science and constitutional principles and should not become law. Thank you and I yield for any questions.