

Testimony of Nisha Verma, MD, MPH, FACOG
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Before the U.S. Senate Committee on Health, Education, Labor and Pensions
“The Assault on Women’s Freedoms: How Abortion Bans Have Created a Health Care
Nightmare Across America”

Good morning Chair Sanders, Senator Murray, Ranking Member Cassidy, and distinguished members of the Senate HELP Committee. My name is Dr. Nisha Verma, I use she/her pronouns, and I am a board-certified, fellowship trained, obstetrician and gynecologist providing full-spectrum reproductive health care. I am a fellow with Physicians for Reproductive Health, and I am also a proud Southerner – I was born and raised in North Carolina, I currently provide care in Georgia, and I have lived in the Southeast for most of my life.

I made a commitment when I became a doctor to care for people, without judgment, throughout their lives. For me, that commitment holds whether I am talking a young person through a first pap smear, delivering a couple’s highly anticipated third child, or supporting a patient and her family as they decide to continue or end a pregnancy. However, after the Supreme Court’s *Dobbs* decision, with Georgia enacting a law that bans most abortions in our state very early in pregnancy, I struggle every day to provide necessary, life-saving medical care. I’ve seen young moms with worsening medical conditions that make their pregnancies very high risk and couples whose deeply desired pregnancies are in the process of miscarrying, be turned away or forced to leave their communities to access needed health care.

As a doctor, I have the immense privilege of sitting with patients and learning about their lives. For me, these patients’ stories are a powerful reminder that abortion is not an isolated political issue, and today, I want to provide a glimpse of what access to abortion care means for real people.

Shortly after Georgia’s six-week abortion ban went into effect in 2022, I saw a young woman who had just started her junior year of high school, and despite using her birth control correctly, realized after missing her period that she might be pregnant. She called to make a clinic appointment for an abortion right away, but when she came to see me, she unfortunately was just a couple days past Georgia’s arbitrary cut-off, which bans most abortions after just two weeks from the first missed period. I had to tell her that, even though I have the skills to help her, I could no longer perform her abortion in our state. She returned to rural Georgia, where she lives, and I didn’t see her again until a few weeks ago. At our most recent visit, she told me that she was unable to find the resources and support to get out of state for abortion care. She also couldn’t find a doctor in her part of the state that took her insurance, Medicaid, for many months, and so even though she was forced to continue her pregnancy against her will, she couldn’t get prenatal care. After delivering her baby, she struggled with postpartum depression and had to move-out of her home, drop out of school, and work a minimum wage job to try to make ends meet. She told me that she loves her son, but this is not the life she wanted or planned for herself.

I have thought about this patient every day since she came back to my clinic. I know it was Georgia’s laws that prevented me from providing her with the medical care she needed and deserved, but I still feel like, as her doctor, I failed her.

This patient's story, while heartbreaking, is not unique. We know that bans and restrictions have forced many people to stay pregnant.¹ And we know the harm that people experience when they are unable to get this care – they are more likely to face long-lasting economic hardship, to stay in contact with a violent partner, and to develop serious health problems.² Mental health conditions, like the postpartum depression my patient experienced, are the leading cause of pregnancy-related deaths in this country. We also know that abortion care is incredibly safe – in fact, in 2022, over 75 major professional societies representing the overwhelming consensus of the science-based medical community, came together to reaffirm that abortion is safe, essential health care.³

As patients face a growing wave of abortion restrictions, many describe feeling betrayed by a government and health care system that is supposed to serve and protect them. Doctors, too, feel betrayed by our government. Many of my colleagues, overwhelmed by laws that threaten to make us criminals for providing evidence-based, life-saving care to our patients, are leaving their states. In places like Georgia, where already over 50% of counties have no OB/GYNs, these worsening workforce shortages are devastating for all aspects of reproductive health care.⁴

I understand that abortion care can be a complicated issue for many people, just like so many aspects of health care and life can be. I also know that abortion is necessary, compassionate, essential health care, and that patients are capable of making complex, thoughtful decisions about their health and lives – no law should prevent them from doing so.

I am unwavering in my commitment to support people in my home in the South. It shouldn't have to be this way. I urge you to listen to the stories of people who provide and access abortion care. I hope these stories help you to see how profoundly restrictions on abortion access harm all of our communities.

Thank you for having me today, I look forward to your questions.

¹ See #WeCount Report, SOC. OF FAM. PLANNING (May 14, 2024), https://societyfp.org/wp-content/uploads/2024/05/WeCount-report-6-May-2024-Dec-2023-data_Final.pdf.

² See Diana Greene Foster, *Turnaway Study: Ten Years, A Thousand Women, and the Consequences of Having or Being Denied an Abortion*, ANSIRH (2020), <https://www.ansirh.org/research/turnaway-study>.

³ *More than 75 Health Care Organizations Release Joint Statement in Opposition to Legislative Interference*, AM. COLL. OF OBSTETRICIANS AND GYNECOLOGISTS (July 7, 2022), <https://www.acog.org/news/news-releases/2022/07/more-than-75-health-care-organizations-release-joint-statement-in-opposition-to-legislative-interference>.

⁴ See Stephanie Colombini, *Turning Away Patients Every Day: Georgia OB-GYN on the Effects of Abortion Bans*, HEALTH NEWS FL (May 16, 2024), <https://health.wusf.usf.edu/health-news-florida/2024-05-16/turning-away-patients-every-day-georgia-ob-gyn-on-the-effects-of-abortion-bans>; Adrienne D. Zertuche, *Georgia's Obstetric Crisis: Origins, Consequences, and Potential Solutions*, GA. SENATE STUDY CMTE ON WOMEN'S ADEQUATE HEALTHCARE (Oct. 26, 2015), <https://www.senate.ga.gov/committees/Documents/Oct%2026%20Ga%20Maternal%20Health%20%20Infant%20Research%20Group%20-%20Dr%20Zertuche.pdf>.