



TO: Judiciary Committee
FROM: Marion Miner, Associate Director of Pro-Life & Family Policy
Nebraska Catholic Conference
DATE: March 6, 2025
RE: LB669 (Cleanup of Informed Consent for Abortion Statutes and Screening for Coercion, Domestic Violence, and Human Trafficking) (Support)

The Nebraska Catholic Conference advocates for the public policy interests of the Catholic Church and advances the Gospel of Life through engaging, educating, and empowering public officials, Catholic laity, and the general public.

The Conference supports LB669, which consists of two main parts.

The first part of the bill strikes provisions of Nebraska’s informed consent statutory framework that were found unconstitutional and permanently enjoined in 2010 after a successful lawsuit filed by Planned Parenthood.¹ Since these provisions are permanently unenforceable, they ought to be removed. This portion of the bill is truly “cleanup.”

The second part of the bill adds to this framework, requiring that an abortion facility must screen a woman for pressure or coercion to abort, as well as for domestic abuse and human trafficking, including sex trafficking, “in a place and manner that ensures her privacy.” This is a commonsense requirement, in our view, that has the potential to relieve much human suffering.

A paper published in 2014 in *The Annals of Health Law* at the University of Loyola-Chicago shed light on the very thick connection between sex trafficking and forced abortion in the United States.² The authors found that:

- “The prevalence of forced abortions is an especially disturbing trend in sex trafficking.”
- “[One] survivor reported seventeen abortions and indicated that at least some of them were forced on her.”
- “Survivors ... had significant contact with clinical treatment facilities, most commonly Planned Parenthood clinics, which more than a quarter of survivors (29.6%) visited.”
- “Since pimps and traffickers generally exercise nearly complete control of their victims, these points of contact with healthcare represent rare opportunities for victim identification and intervention. ... These opportunities have largely been missed.”

¹ See *Planned Parenthood of the Heartland v. Heineman*, 724 F.Supp.2d 1025 (D. Neb. 2010), and 664 F.3d 716 (8th Cir. 2011).

² Laura J. Lederer & Christopher A. Wetzel, “The Health Consequences of Sex Trafficking and Their Implications for Identifying Victims in Healthcare Facilities.” *The Annals of Health Law*, University of Loyola-Chicago School of Law, Vol. 23, Issue 1 (2014).

- “Just over half of the respondents who answered said that at least some of the time the doctor knew they were ‘on the street.’”
- “One survivor described her situation: ‘I got pregnant six times and had six abortions during this time. Several of them were from a doctor who was a client—he did them “back door”—I came in the back door after hours and paid him off the books. This kept my name off any records. ... At least one of my abortions was from Planned Parenthood because they didn’t ask any questions. But they were expensive. ... I eventually lost my fallopian tubes [and had to have a hysterectomy].”

Two points from this study deserve special attention for their relevance to LB669:

- First, the fact that more than a quarter of former sex trafficking victims who participated in this study were brought to an abortion facility at least once during the time they were being trafficked.
- Second, that these points of contact “represent rare opportunities for victim identification and intervention,” and that these opportunities are being missed.

It should be noted that nothing in LB669 says that an abortion may not take place after the required screening is done, even when the person presenting for an abortion reveals that she is a victim of violence or sex trafficking. LB669 simply gives the woman an opportunity to back out of an abortion she does not want and, regardless of whether she freely chooses abortion, an opportunity to escape confinement, control, and abuse.

Further, nothing in LB669 requires that any phone call to any law enforcement agency or hotline be made—this decision is for the woman alone should she take the opportunity afforded by the bill.

Regardless of any person or institution’s opinion on abortion or its legality, there are legitimate and important goals we can all pursue together for the benefit of pregnant women. Many of these goals have very broad public support and the Conference has successfully advocated for many of them in the form of legislative bills with as broad and bipartisan a coalition as possible.³ We see LB669 as being in the same vein. Because of the dehumanizing harms it can help prevent, LB669 is as important as any of these policies.

We respectfully urge you to advance this bill to General File. Thank you for your time and consideration.

³ Examples include various expansions to Medicaid, especially for prenatal and postpartum coverage for both moms and babies; laws to streamline and make possible better research on maternal mortality and morbidity; laws to combat sex trafficking; and the creation of the Pregnancy Help Act, among many other proposals. We have also advocated for expanding the Earned Income Tax Credit and creating a new Child Tax Credit program. All of these policy proposals have been centered on meeting medical, social, interpersonal, and material needs of pregnant and postpartum women and families.