

TESTIMONY IN SUPPORT OF HB 1658  
The Abortion Violence Act  
Wednesday, May 27, 1992

by Martha R. Tornblom, Clinic Escort

My name is Martha Rich Tornblom. I am known to my family and friends as Marty Tornblom.

I am a mother and a grandmother. I am a woman who has experienced combat as a volunteer while defending the right of women to obtain safe and legal abortions.

For over four years I have been a volunteer escort at the Hillcrest Women's Medical Center in Harrisburg. I am one of dozens of men and women of diverse age, occupation, and beliefs who have been trained to provide support to patients as they arrive at the clinic to have abortions. A need for this support was recognized following one of the first "rescues" by a large group of anti-choice demonstrators who attempted to prevent entry to the clinic in December of 1988. The Harrisburg City police arrested 79 that day and they were transported in bus loads to Fort Indiantown Gap to be processed. The escorts and clinic staff speculated then what the ultimate cost to the city would be in terms of the number of police personnel, vehicles, overtime, and court expenses.

That was just the beginning. Hillcrest Clinic secured the services of a security guard. On the morning of March 18, 1989, I had arrived at the rear parking lot of Hillcrest Clinic to escort patients from the rear parking lots to the front entrance. The security guard was present and fewer than a dozen protesters were shouting and demonstrating in the alley adjoining the parking lot. All at once, the designated leader of that group walked onto the parking lot and attempted to engage me in conversation. Without warning, a crowd of men rushed to the rear door and attempted to gain entry.

I somehow pushed through the throng and placed my body between them and the corridor which led to the lab and procedure rooms. From behind me, from the bullhorn held by their leader, came the command, "We must subdue that woman!"

My memory of the next few minutes is a blur. I recall flashing images of being thrown against the wall amid the rush of invaders trying to push through the door, of a staff person helping me to pull the door closed, and another helping to restrain one of the four men who had

gained access to the corridor. I became aware of a progressive numbness in the fingers and thumb of my left hand. It was painful to rotate my wrist. The security guard, who had been busily engaged outside the building, arrived with the police who took the four men into custody. When I mentioned to an officer that I had been injured he asked me to identify those who had pushed me. I was able to recognize two of the men and I signed complaints against them.

I went outside and into the front door of the building. I learned that two of the "patients" whom I had escorted to the waiting room had rushed through the building and had been the ones who had opened the rear exit doors allowing their friends access. Seven invaders had entered the front door, sat on the floor and locked themselves together with Kryptonite bike locks. Another invader harassed and threatened patients by thrusting a camera in their faces, taking pictures, and implying that such pictures would be made public. When it was determined that the police had confiscated the camera and taken control of events, I helped to escort patients out of the waiting room to an upstairs area away from the pile of people who remained locked together.

The doctor examined my hand and suggested that I leave the clinic and be examined immediately. At Harrisburg Hospital tests determined that I had suffered no fractures. Sprains and bruises were evident. I received treatment and was released. I went home and called the clinic.

It was then mid afternoon and I was told that the police and fire department had been trying for a few hours to separate those who had locked themselves together. They had finally called upon special equipment normally used to cut through heavy metal in the rescue of auto accident victims. The equipment was damaged in the effort.

Several days passed before I began to experience flash-back and sleep disturbances. My daily routine became affected. I sought counseling. I learned that in focusing on the responsibility that I had assumed for the safety of the patients and the security of the clinic, I had suppressed all fear and anger that day. I learned that my reactions were the same as those of a soldier who had been in combat.

Several months later a hearing was held before a District Justice to hear the cases against those who had been arrested. My assailants and the others were well represented by legal council. I observed the frustration of the arresting officers as one by one, cases were dismissed or fines of twenty five dollars were imposed. I was not called upon to testify. The cost of several

hundred dollars for the repair of the rescue equipment was divided among the seven on whom it was used. I have never been able to determine whether any of the fines or costs have actually been collected.

Since 1989 I have attending numerous hearings in Dauphin County relating to acts of violence on clinics and attempts to prevent access to clinics. I have also followed cases where complaints were filed and then evaporated into the system with no judicial resolution. There has been no mechanism for compiling the collective cost to individuals, the clinics, and most important, to the municipalities for dealing with such acts.

Many of the same names appear on list after list of those arrested for similar crimes. Some boast of having been incarcerated in a dozen or more states. While most media reports focus on clinics where abortions are performed, facilities whose services are limited to reproductive health and contraceptive services are also targeted. During the time that I was employed in the administrative office of Planned Parenthood of the Capital Region in Harrisburg the police department assisted us in developing staff procedures in the event of explosion or invasion following threats that we had received via mail and telephone. Abortions are not performed at PPCR. However, the informational literature which we provided to our patients was labeled pornographic by individuals who considered our presence a threat to the quality of the community in which we were establishing a new clinic.

The "nuisance" violations involving trespass and harassment may seem frivolous when addressed individually. The more serious cases of arson or criminal mischief may appear to be the isolated work of a few dangerous zealots from whom the public can be protected by existing laws. Only when every case comes into one report under a title which describes their true nature, only when the names of the violators and the collective costs are placed under one cover can the issue of clinic violence be identified as a dangerous and very costly crime. HR 1658 is a first step in giving statewide recognition to this crime to which recent events in Wichita and Buffalo have brought national attention. For the clinics, their staffs and patients, as well as for me, this hearing is providing the first opportunity to make our experiences part of any public record.

Should the Abortion Violence Prevention Act become law in the Commonwealth of Pennsylvania, we will see for the first time, an effort to make consistent and accountable the recording and resolution of this specific crime.

I thank this committee for the opportunity to tell my

story. As those words "We must subdue that woman" reverberate beyond that corridor, that time, that event, we must keep in mind that clinic violence is not just an attack directed toward a building nor toward the patients and staff. Reproductive decisions are not made here. They are made in private, at home, work, church, doctor's office, with the support of family, friends, loved ones -- or alone. The clinic is merely the place where those decisions are carried out. The right to make personal, private reproductive decisions is therefore the true target of these violent crimes. The women who must exercise that right in an atmosphere of danger, harassment, and threats of public exposure are victims. So too is the public at large which ultimately pays the cost in tax dollars to protect this right from senseless violent attacks.