

Date Feb. 16, 2009

MINUTES OF THE HOUSE FEDERAL AND STATE AFFAIRS COMMITTEE

The meeting was called to order by Chairman Melvin Neufeld at 1:30 p.m. on February 11, 2009, in Room 143-N of the Capitol.

All members were present except:

Representative Mike Peterson- excused
Representative Louis Ruiz- excused

Committee staff present:

Mike Heim, Office of the Revisor of Statutes
Jason Long, Office of the Revisor of Statutes
Julian Efirid, Kansas Legislative Research Department
Dennis Hodgins, Kansas Legislative Research Department
Carol Doel, Committee Assistant

Conferees appearing before the committee:

Rep. Lance Kinzer,
Rep. Steve Heubert,
Kay Lyn Carlson, Director Abortion Recovery Center
Carrie Carlson, Director of Caring Pregnancy Options
Dr. William Schwartz, Alexandra's House
Kathy Ostrowski, Legislative Director of Kansans for Life
Barb Gosa, Women's Right to Know & See
Cheryl Sullenger, The Women's Right To Know and See
Brenda Spurlock, Concerned Citizen
Laurie Hermesch, Concerned Citizen
Julie Burkhart, ProKanDo
Mark Pederson , Aid For Women
Holly Weatherford , Planned Parenthood

Others attending:

See attached list.

The Chairman opened the floor for the introduction of proposed legislation. There was none.

Chairman Neufeld opened the hearing on **HB 2076 - Woman's-right-to-know act; amending K.S.A. 65-6709.**

Jason Long, Assistant Revisor, Office of Revisor of Statutes presented an overview of **HB 2076.** (Attachment 1).

Rep. Lance Kinzer, testified in support of **HB 2076** and gave the opinion that the bill would require that 24 hours prior to an abortion, the mother must be provided a list of free sonogram locations and information regarding free counseling assistance for medically challenging pregnancies and contacts for free perinatal hospice services. Additionally, **HB 2076** mandates that an anti-coercion sign be posted in the clinic so that every woman knows her legal rights. It also requires the state to create a standard information video and online website that includes modern fetal ultrasound in 2 week developmental increments. Rep. Kinzer stated that he is hopeful that the bill provides a point of common ground on an often contentious issue. (Attachment 2)

Representing Women's Right to Know & See was Kay Lynn Carlson, LMSW who came before the committee in support of **HB 2076.** Ms. Carlson related her experience of abortion at the age of 17. She did not, at that time, have the information to help her make an educated decision. It is Ms. Carlson's opinion that **HB 2076** will hold abortion providers to the same standard of practice as other obstetric doctors serving in Kansas and give women a change to make a better informed decision that she had. (Attachment 3)

Also supporting **HB 2076** was Carrie Carlson, Executive Director of Caring Pregnancy Options. Ms. Carlson stated that believes that **HB 2076** is an extremely important bill for women's rights and that every woman should have the right to view her own ultrasound if she so chooses. (Attachment 4)

CONTINUATION SHEET

Minutes of the House Federal And State Affairs Committee at 1:30 p.m. on February 11, 2009, in Room 143-N of the Capitol.

Dr. William Schwartz, a Maternal-Fetal Medicine specialist testified for the Alexandra House in support of **HB 2076**. The Alexandra House provides support for patients who choose to continue their pregnancies in situations where there is a lethal diagnosis. Dr. Schwartz opined that **HB 2076** would help other women learn about Alexandra's House before making an unformed irreversible abortion decision. ([Attachment 5](#))

Kansans for Life was represented as proponents of **HB 2076** by Kathy Ostrowski, Legislative Director. Ms. Ostrowski stated that the bill would put an ultrasound video online showing fetal development and list locations for free sonograms. **HB 2076** would also allow women to view ultrasound imaging and hear the fetal heart monitoring that they already pay for. In addition clinics would add information at two places in the already observed protocol of "24 hours before abortion" and "30 minutes before abortion" and will post an anti-coercion sign. ([Attachment 6](#)) Ms. Ostrowski also provided *A Special Report on Forced Abortion in America* ([Attachment 7](#)), a list of sites where free abortion counseling and ultrasounds can be obtained at no charge ([Attachment 8](#)), *Abortion Clinics Statewide* ([Attachment 9](#)), *Kansas Abortions Gestational Age* ([Attachment 10](#)), *Kansas Abortions Method of Abortions* ([Attachment 11](#)), and *Statement of Scientists, Medical and Mental Health Professionals About Abortion's Effect on Women*. ([Attachment 12](#))

Barb Gosa, Executive Director, Advice and Aid Pregnancy Centers, Inc. related her abortion experience, and and supports the passage of **HB 2076** which would help women to make more educated choices in regards to abortion. ([Attachment 13](#))

Cheryl Sullenger addressed the committee as a private citizen, but has a professional capacity as the senior advisor for Operation Rescue. Ms. Sullenger stands in support of **HB 2076** related some of the misleading information presented to women considering abortion. It is her belief that the passage of **HB 2076** would address some of the problems they have uncovered by giving women access to their own ultrasound images, and help them make determinations based on accurate information. ([Attachment 14](#)). Ms. Sullenger also included in her testimony *A Statement of Shaye Stewart* ([Attachment 15](#)), a receipt made out to Shaye in the amount of \$100 dollars ([Attachment 16](#)), as well as sonogram images. ([Attachment 17](#))

Brenda Spurlock testified in support of **HB 2076** relating that it is her firm belief that the bill will better assist women and families facing dire medical diagnoses for their unborn babies and will inform pregnant women about the amazing free services available in Kansas for prenatal medical challenges. ([Attachment 18](#))

Laurie Hermesch testified in support of **HB 2076**. Ms. Hermesch related an abortion experience of 30 years ago and feels that there would be so many lives saved if sonograms were available prior to an abortion as well as the avoidance of physical complications and the emotion devastation, grief and deep regret that follows the abortion decision. ([Attachment 19](#))

With no other proponents to **HB 2076**, the Chair opened the floor and recognized Julie Burkhart, who represents ProKanDo, as an opponent. Ms. Burkhart gave the opinion that **HB 2076** would work to interfere with the doctor patient relationship. She also opined that the language in the bill would require reproductive health clinics to provide free marketing services for this politically motivated crisis pregnancy center, and would not protect women. ([Attachment 20](#))

Mark Pederson, Aid for Women, Kansas City, abortion clinic manager, presented testimony in opposition to **HB 2076**. Mr. Pederson related a number of problems he has with the bill such as genetic counseling if the path of the pregnancy cannot be changed, the cruelty of contact info for medically challenged pregnancies, the use of a fetal heart monitor, the sign which has to be posted at his clinic, and related that a DVD would be a waste of taxpayers money and would not stop abortions. ([Attachment 21](#))

Planned Parenthood was represented by Holly Weatherford, J.D. who stood in opposition to **HB 2076**. Ms. Weatherford related that Planned Parenthood feels that **HB 2076** seeks only to place more unnecessary restrictions on abortion providers and women seeking abortion care and do nothing to prevent unintended pregnancy or reduce the number of abortions in Kansas. ([Attachment 22](#)) Ms. Weatherford also included an article entitled *HB 2076: States who have enacted similar laws* ([Attachment 23](#)), *The Current Status of Kansas Law On Reproductive Health Care* ([Attachment 24](#))

CONTINUATION SHEET

Minutes of the House Federal And State Affairs Committee at 1:30 p.m. on February 11, 2009, in Room 143-N of the Capitol.

With no other persons wishing to address **HB 2076** the Chair closed the hearing.

Hearing on HB 2166 - Health exceptions to the prohibition of late-term and partial birth abortions.

Rep. Steve Huebert addressed the committee as a proponent of **HB 2166** stating that this bill would clarify the original intent that there is no mental health exemption for a late term abortion and is an attempt to find bi-partisan common ground on this controversial issue. (Attachment 25) Rep. Huebert also submitted an article from Relevant Magazine for review. (Attachment 26)

The hearing was then turned to the opponents of **HB 2166** and Julie Burkhart representing ProKanDo was recognized. Ms. Burkhart stated that the bill seeks to exempt a mental health exception from abortion care and this would go directly against an already established constitutional standard. (Attachment 27) A DVD relating to **HB 2166** was provided by Ms. Burkhart a copy of which can be obtained from ProKanDo - PO Box 8249 - Wichita, KS 67208.

Holly Weatherford, J.D. from Planned Parenthood stood in opposition of **HB 2166**. Ms. Weatherford stated that **HB 2166** seeks only to place more unnecessary restrictions on abortion providers and women seeking abortion care and do nothing to prevent unintended pregnancy or reduce the number of abortions in Kansas. (Attachment 28).

Written testimony was provided by Michael Schuttloffel, Executive Director, Kansas Catholic Conference, (Attachment 29), Megan Halstead (Attachment 30), Michelle Armesto-Berge (Attachment 31), and Judy Smith, State Director of Concerned Women for America of Kansas. (Attachment 32)

The Chair closed the hearing on **HB 2166**.

The Chairman announced the next meeting will be Monday, February 16th with a hearing on **HB 2180 - Alcoholic beverages; wine lockers in a drinking establishment.**

With no further business before the committee, the Chair adjourned the meeting at 3:25 p.m.

House Federal and State Affairs Guest list

Date 2-11-09

Name

Organization

Mark Pederson	
Brenda E. Spaulding	
Patricia Kohls Barrett	
JORA 2	
Kirsten Andrew Sharp	Washburn Law
Commission for Life	
Robbie Kramer	concerned citizens
Peggy & Jay Norney Brown	Right to Life
Kim Johnson	Advice and Aid Pregnancy Center
Connie Ann Schum	
Mary Ellen Dieckrich	Divine Respect Life
Bonnie B Roth	Pro-Life
Thomas Roth	Pro Life
Norma Rosner	pro Life
Alicia E. Sutz	pro Life
Joan Schurig	Pro Life
Don Rosenow	Clay County for Life
Vanita Rosenow	Clay County for Life
Bill Schwartz	Alexander's House
Norbert Hermes	KFL
Marlene Hermes	KFL

House Federal and State Affairs
Guest list

Date 2-11-09

Name

Organization

Holly Weatherford

PPKM

Dandi Gerson

PPKM

Krysten Yates

PPKM

Barb Gosa

AAPC

Ron Keeseey

WPC

Cheryl Sallenger

CR

Jamie Hernandez

Kathy Thater

KSBE

Sheila Kostas

PPKM

Forest Newheart

PPKM

Haylyn Carlson

Danie Carlson

Alex Herman

intern

MARY ANN TORRENCE, ATTORNEY
REVISOR OF STATUTES
JAMES A. WILSON III, ATTORNEY
FIRST ASSISTANT REVISOR
GORDON L. SELF, ATTORNEY
FIRST ASSISTANT REVISOR



OFFICE OF REVISOR OF STATUTES
KANSAS LEGISLATURE

Legal Consultation—
Legislative Committees and Legislators
Legislative Bill Drafting
Legislative Committee Staff
Secretary—
Legislative Coordinating Council
Kansas Commission on
Interstate Cooperation
Kansas Statutes Annotated
Editing and Publication
Legislative Information System

Briefing on House Bill 2076

Jason B. Long
Assistant Revisor
Office of Revisor of Statutes

February 11, 2009

House bill 2076 makes several amendments to the Woman's-right-to-know act (K.S.A. 65-6708 through 65-6715). This act requires that certain information be provided to a woman in order for the physician to obtain voluntary and informed consent prior to the performance of an abortion.

The bill amends K.S.A. 65-6709 on page 1, in lines 39-42 so that the information provided to the woman concerning when a late-term abortion may be performed under Kansas law matches what is statutorily required. The bill also adds a provision requiring the physician to provide contact information for free counseling and free perinatal hospice services.

Also in the bill is a requirement that if ultrasound imaging is used in preparation for or in the performance of an abortion, then the woman must be given the opportunity to view and receive a copy of the ultrasound image at least 30 minutes prior the abortion procedure. This is to be done at no additional cost to the woman. The physician is also required to time-stamp the woman's medical record with the time the opportunity to view the ultrasound image was offered.

Likewise, the bill requires that if heart monitoring equipment is used in preparation for or in the performance of an abortion, then the woman must be given the opportunity to listen to the heartbeat of the unborn child at least 30 minutes prior the abortion procedure. This is to be done at no additional cost to the woman. The physician is required to time-stamp the woman's medical record with the time the opportunity to listen to the heartbeat was offered.

New subsection (k) is added to K.S.A. 65-6709 requiring abortion providers to conspicuously post a sign clearly visible to patients that provides the notice set forth in the bill on page 4, lines 20-27. This requirement does not apply to those medical facilities that perform abortions only when necessary to prevent the death of the woman.

The bill amends K.S.A. 65-6710 to require that the informational materials published by the KDHE include a list of free ultrasound providers. Also, KDHE is required to publish a video containing the information required under this section and ultrasound images of fetal development at two-week gestational increments. Finally, all of the information required to be published under this section must also be published by KDHE online.

STATE OF KANSAS
HOUSE OF REPRESENTATIVES

COMMITTEE ASSIGNMENTS
CHAIRMAN: JUDICIARY
MEMBER: CORRECTIONS AND
JUVENILE JUSTICE

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LANCE KINZER
REPRESENTATIVE, 14TH DISTRICT

Testimony Regarding HB 2076

While it is difficult for any bill touching on abortion not to engender some controversy, HB 2076 is a good faith attempt to legislate in an area where I believe people with very differing perspectives can find common ground. In particular, it is my hope we can agree that:

- 1) It is imperative that every woman considering an abortion receive complete information on the reality and status of her pregnancy and her unborn child;
- 2) Every woman submitting to an abortion should only do so after giving her voluntary and well informed consent.

HB 2076 will require that 24 hours prior to an abortion, the mother must be provided a list of free sonogram locations and information regarding free counseling assistance for medically challenging pregnancies and contacts for free perinatal hospice services.

30 minutes prior to an abortion, when the mother consults with her doctor (which is required under current law) and a sonogram is used, the woman must be offered the opportunity to see and get a copy of the sonogram image and to hear her baby's heartbeat. It is my understanding that all four clinics in Kansas use sonograms.

Additionally, the bill mandates that an anti-coercion sign be posted in the clinic so that every woman knows her legal rights. It also requires the state to create a standard information video and online website that includes modern fetal ultrasound in 2 week developmental increments.

Each of these provisions attempts to further the goal of making sure women have all of the information necessary to offer full and informed consent. Kansas law (K.S.A. 65-6710) already requires that a woman be provided with information regarding "the probable anatomical and physiological characteristics of the fetus." HB 2076 acts in furtherance of this existing legal requirement by making sure that materials presented to the woman utilize the best available technology on showing such anatomical and physiological characteristics.

Again, it is my sincere hope that this bill provides a point of common ground on an often contentious issue.

House Fed & State Affairs
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Attachment 2

Testimony of KAY LYNN CARLSON, LMSW

Good afternoon, Chairman Neufeld and Members of the House Federal State Committee;

My name is Kay Lyn Carlson and I am here today in support of the Woman's Right to Know & See, House Bill 2076. This bill is very near and dear to my heart and should not be underrated! For too long there have been barriers preventing women access to view their own ultrasound prior to obtaining an abortion. Why? Isn't it a **fundamental right that every person undergoing a surgical medical procedure be given full access to any and all information** in order for them to determine the best decision possible for their own health and well-being? Why have abortion supporters across the country fought allowing the women to view her own ultrasound?

Carol Everett, a previous director of four abortion clinics and owner of two helps shed light into this question:

"As an abortion provider, I knew every woman having an abortion asked two questions. The first was 'Does it hurt?' The second was 'Is it a baby?' We knew if she knew the truth that all the body parts were present by the time she had the procedure, she would not have the abortion. We lied to her. We allowed each counselor to answer what she wished: a glob of tissue, a product of conception or a blood clot - even though we knew we had to put every baby's body back together to be certain all the parts had been removed. If a body part was left inside the mother, an infection would likely occur. Even at six weeks, the earliest an abortion can be safely completed, the transparent baby must be accounted for and reassembled to determine completion of the abortion procedure."

When I was 17 I too was told that my twelve week preborn baby was "just a blob of tissue" and "had not begun to form" and was definitely "not a baby". I was scared, in crisis, too afraid to tell my parents I was pregnant and time was NOT on my side. I crossed over the state line to Missouri, forged my name and naively underwent an irreversible medical procedure. I was told not to worry-- that this was a safe, easy, simple procedure and that my parents would never have to know.

During the procedure my legs shook uncontrollably and I couldn't stop crying. The woman standing at my bedside tried to comfort me by saying "Remember dear, once this is over you can go home and never have to think about it again. It will be like nothing ever happened; life will be back to normal." For the next several years I tried to play 'normal' and avoided any thoughts about what had taken place-- a term known as denial.

Eight years later, as I was viewing an ultrasound of my second pregnancy, my life would immediately start to spiral downhill, out of control to a place where I wanted to die. I saw a baby! My baby! And she was fully formed! Her tiny little hand was in full sight and the nurse commented that she was waving to us. I went numb. I couldn't believe what I was seeing. I wasn't prepared. As tears were streaming down my face the nurse asked me if I was okay and I lied and said "yes" when inside I was dying. THIS WAS NOT A BLOB OF TISSUE! "What have I done?" And the sad reality was that the baby I was seeing on the screen was YOUNGER than the baby I had aborted.

Shortly after my delivery, I began to have horrible nightmares of my daughter such as seeing her body parts cut up and placed in old medicine jars, or of her screaming out for help and I wouldn't save her. Also, I had intrusive thoughts like me wringing her neck and breaking it. Not understanding what was happening to me I thought I was going crazy and I had a hard time bonding with my newborn baby out of fear that I would harm her.

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Attachment 3

I sought help through professional counseling and discovered I met the criteria for post-traumatic stress disorder with delayed onset. I also struggled with anxiety, self-hatred and depression to a point where I truly did not want to live anymore. I contemplated suicide and thankfully never attempted it.

After my counseling, I went back to college and secured an undergraduate and graduate degree both in social work from Washburn University. Today, I am a Licensed Master Social Worker specializing in post-abortion recovery work. I am the director of ARC an abortion recovery center located in Topeka, Kansas.

The experiences I had after my abortion are similar to responses from other women who were not privy to fetal development prior to their abortion(s). Hundreds of women I have been in contact with say the same thing over and over again "I didn't know it was a baby, they didn't tell me it was a baby. ...the counseling I received consisted of telling me the reasons why I should have an abortion" and so on. Two clients I have personally served share this about their experience:

"Make no mistake, if I had an ultrasound and if I had seen it I would not have gone through with the abortion. Part of the reason I was able to have the abortion was because it was more of an "idea" of a baby but not "really" a baby. The ultrasound would have unequivocally changed my mind. I could never have killed my baby after seeing her. I miss my baby every day."

"When I had my abortion eleven years ago, no one offered to let me see an ultrasound or even counsel me on what stage the baby's development was at 7 ½ weeks. Had I been able to see the sonogram, I would have definitely changed my mind and not gone through with the abortion."

Once women make the connection that there is actually a baby being formed and growing in her womb the "mother" in her often bonds to the baby immediately and the dynamics of the abortion decision drastically changed. Certainly, this is an undeniable threat to the overall profit margins of a business selling abortions.

You might hear testimony from the opposition saying that they are trying to prevent extra stress on the woman from viewing an ultrasound. But the bill only offers an option, not a mandate. An individual sonogram, coupled with being able to watch fetal development in 2 week increments online, will significantly help women make an informed decision.

There is not a day goes by that I wish I would have seen and known that it was REALLY a baby. Passage of this bill will allow women the option of actually viewing their unique baby and save at least SOME women from experiencing deep psychological and emotional scars.

HB 2076 will hold abortion providers to the same standard of practice as other obstetric doctors serving in Kansas and give women a chance to make a better informed decision than I had. Please pass HB 2076.

Respectfully submitted,
Kay Lyn Carlson, LMSW

ARC - Abortion Recovery Center,
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785-272-6212 klcarlson@arctopeka.org

**PROPONENT –
HB 2076 Women’s Right to Know and See act**

Feb. 9, 2009

Dear Chairman Neufeld and Members of the House Federal State Committee:

As the Executive Director of Caring Pregnancy Options in Topeka, Kansas, I have had the opportunity to help many women who are thinking about having an abortion. Most of our clients are very interested in having an ultrasound exam. In all the years we have offered our clients the ability to have an ultrasound none of them have been traumatized or hurt by this. In fact the overwhelming response has been one of great interest and curiosity to find out the fetal age and see the development of the fetus.

Also, to most of our clients the financial barrier to having an ultrasound is enormous, this is why we offer ultrasound at no cost to the client. In my experience I have found women to be most receptive to an ultrasound so that she feels she is better able to make an educated decision about her choice. I believe the ultrasound is of extreme importance so that every woman who is considering abortion will be able to make an educated and informed decision, especially so, considering a medical procedure is involved.

Our ultrasound exams are performed in a highly respected doctor's office, which can be very helpful to the client in case of a fatal fetal diagnosis, in which case a doctor would be readily available to advise. Our sonographer is ARDMS certified with three years of experience. She has said that during the exam the mother is astonished to hear the fetus' heartbeat and to see that it is a real baby in her womb.

I believe this is an extremely important bill for women's rights. Every woman should have the right to view her own ultrasound if she so chooses, that is why I support HB 2076 and hope that you will too. I appreciate your consideration.

Sincerely,

Carrie Carlson,
Executive Director
Caring Pregnancy Options
2041 SW McAlister
Topeka, KS 66604

House Fed & State Affairs
Date: 2-11-09

Attachment 4

Proponent, House Bill 2076, Feb 11, 2009
House Federal State Affairs Committee - Rep. Melvin Neufeld, chair
Testimony by Alexandra's House

Good afternoon chairman and members of this committee,
I am Dr. William Schwartz, from Overland Park, Kansas and I am on the medical advisory staff for Alexandra's House here in support of HB 2076, particularly section 1 (a) (4) [pg 2 line 4-6] that would deliver contact information about support services, such as Alexandra's House, to women who have been sent to abortion clinics with terminally ill fetuses.

I am a Maternal-Fetal Medicine specialist at Midwest Perinatal Associates. A significant amount of our practice deals with prenatal diagnosis. Unfortunately, we frequently diagnose fetuses with anomalies or chromosomal abnormalities that are not compatible with life. Some of the more common lethal fetal diagnoses that we see are anencephaly, achondrogenesis, renal agenesis, total body stalk anomaly, pentalogy of Cantrell, renal agenesis, trisomy 13 and trisomy 18. These fetuses will either die in utero or shortly after they are born. These fetuses will die regardless of the medical treatment that the mother receives during her prenatal care.

When the patient and their family receive this diagnosis they are usually devastated and emotionally distraught. They have many questions. They are concerned for their baby, themselves and future pregnancies. Often they desire to seek a second opinion hoping that the diagnosis was in error. Our responsibility to the patient and/or family is to appropriately inform them of their situation and explain their options. Unfortunately, their options are usually only limited to either termination or continuing the pregnancy and allowing the fetus to die in utero or shortly after the baby is born.

When I first started practicing Maternal-Fetal Medicine in the Kansas City area there were several options and support for those patients who desired to have early termination for their fetuses with lethal diagnoses. However, there was very little support services for women who desired to continue the pregnancy and allow the baby to die naturally in utero or shortly after birth. Our practice and the referring physician's practice were ill equipped to handle the emotional issues that these women and their families needed. Fortunately, Alexandra's House was founded in April of 1997. Alexandra's house is a perinatal hospice center. They are able to provide these women and their families with the extra support that they need. Currently, there are 69 perinatal hospice centers in the United States.

Studies supportive. It is very critical that these women are counseled on all their options when a lethal diagnosis of their fetus has been made. The counseling should be done in a non biased and objective manner. Either option that a woman chooses will usually be the right option for her, when counseled appropriately. Unfortunately, I have seen several women counseled that their only option is termination. If this is the wrong decision for that woman emotionally it can lead to years of emotional turmoil and guilt.

Despite the significant increase in awareness and understanding of both prenatal diagnosis and perinatal grief, there remains a great deal of ambiguity, uncertainty, and misunderstanding about how to approach and care for these particular situations.

A study reported in Obstetrics and Gynecology in 2002 reported that up to 20% of women with a fetus with a known lethal anomaly chose to continue their pregnancy. A recent study from Madigan Army Medical Center in Tacoma, Washington had 33 patients with clearly delineated lethal fetal anomalies. 85% chose to participate in the perinatal hospice program. The care of this group of patients was accomplished without any notable maternal morbidity.

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Attachment 5

It is also commonly reported in couples that the recent death of a child will often lead to divorce within a few months after the loss. It is hoped that through counseling services provided to couples by perinatal hospice services in preparation for the eventual loss of a baby, that their marriages are strengthened by this experience. Alexandra's House, has been supplying this support over the past decade. One mother said her marriage was "80% better" and another recently said she and her husband are "closer now than on their wedding day". Currently only one family of the approximately 300 families that Alexandra's House has cared for are divorced.

Alexandra's House provides support for patients who choose to continue their pregnancies in situations where there is a lethal diagnosis.

While hospice services exist for adults, it has been an uncommon option for fetuses and babies. Parents of gravely ill unborn babies, who decide to continue the pregnancy despite its desperate outcome, are alone in their grief, their search for truthful information, and their need for support

Alexandra's House has one of the largest body of experiences in providing "perinatal" (prenatal through postnatal) hospice services in the country, offering care to anyone in need of its services, for free. Alexandra's House is an all volunteer service organization providing a valuable service to families and the medical community. Many physicians, nurses, social workers, chaplains, etc have reported that Alexandra's House made their jobs and lives easier. I will attest that their services are so valuable that they need to be available to those women who would benefit from them.

Registered nurses Patti Lewis, founder, and Kathy Sexton have 30 years combined experience in the field. Our medical advisory panel is expanding and there is great interest among the obstetrical and pediatric specialists at various hospitals to see Alexandra's House continue to thrive. Currently, Dr. Jeff Wall, M.D., an obstetrician/gynecologist, and myself, a maternal-fetal specialist, serve as medical advisors. Alexandra's House contacts are extensive, and they call upon them as the specific needs arise.

Alexandra's House is now, via their website (www.alexandrashouse.com), receiving requests for help with birth planning and grief support by families and by professionals across the US. One group from New Zealand is coming to visit Alexandra's House this year so that they might establish there own Perinatal hospice program.

Details of medical co-ordination. Alexandra's House does not provide "professional" nursing services. They use local already-existing pediatric hospice organizations that do charge for their services and do a great job of keeping these terminally ill babies comfortable, should they come home to Alexandra's House to die (meaning they lived long enough to be dismissed after birth from the hospital). Alexandra's House does not duplicate services that already function in the greater Kansas City metropolitan area. It is a great relationship.

When Alexandra's House agrees to house an out-of-state mother, they make sure that there is care coordination through the specialized medical groups and hospitals, commonly Overland Park Medical Center, Saint Luke's Medical Center, Truman Medical Center and Children's Mercy Hospital. Once these groups have accepted the mother into care, she can come to Alexandra's House. Most mothers have private insurance or Medicaid to pay for obstetrical services and licensed hospice services, if utilized.

Other mothers for whom they supply housing needs are those who live out of the area and are being seen by the consulting high risk groups as mentioned earlier and who plan to deliver their babies in Kansas City. If the baby has a slight chance of survival the maternal-fetal medical physicians and/or obstetricians coordinate all the critical management to be given at the moment of birth and access to

neonatologists and neonatal intensive care units if needed. Alexandra's House often house these families 4-6 weeks prior to due date and after birth, as long as baby survives or is dismissed to the family home.

Alexandra's House also offers:

- "Swaddling Clothes" Program - to provide a special burial outfit, a small blanket and little toy to put with each baby in their casket;
- "Destiny's Gift" program - which covers burial costs and the more expensive items, such as a headstone, for those infants whose parents cannot assume this financial burden. Alexandra's House believes that being loved and receiving the dignity of a proper burial is every baby's birthright.
- A Grandparents Group – because Grandparents grieve "twice": once for their grandchild and once for their son or daughter. Alexandra's House has a roster of grandparents who are willing to advise other grandparents.

In the United States 0.2-0.3% (6,000-10,000) of live-born infants each year have defects severe enough to cause neonatal death. In Kansas City and beyond, the mission of Alexandra's House is to make that journey easier for babies and their families.

It is my understanding that two of Alexandra's House past clients will testify today as to their appreciation for their services. HB 2076 would help other women learn about Alexandra's House before making an uninformed irreversible abortion decision.

Thank you. I stand for questions from the committee.

ALEXANDRA'S HOUSE

Executive director, Patti Lewis, R.N.
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**Proponent, House Bill 2076
Woman's Right to Know and See**

Feb.11, 2009

Good afternoon, Chairman Neufeld and Committee,

Abortion is irreversible, and full and accurate medical information is a priority. Kansans for Life strongly supports the **Woman's Right to Know & See act**, HB 2076, which improves and updates information that Kansas committed to providing for pregnant women since 1997. Under this bill:

- 1) KDHE will put an ultrasound video online showing fetal development and will list statewide locations for free sonograms; and
- 2) abortion clinics will allow women to view ultrasound imaging and hear fetal heart monitoring that they already pay for. Clinics will add information at two places in the already observed protocol of "24 hours before abortion" and "30 minutes before abortion" and will post an anti-coercion sign.

KDHE mandates

Many hundreds of good-hearted Kansans-- lay volunteers and medical personnel-- already donate their time and money to staff the 76 pregnancy centers across Kansas. These various centers offer maternal assistance and counseling, without cost, to women. Offering ultrasound services is a growing trend and there are at present 14 of these centers, in 11 cities, that offer FREE ultrasound (see attachment).

The state of Kansas produces a booklet, "If You are Pregnant" and a listing of resources, listed by county, that all women seeking abortion are required to have 24 hours prior to any abortion. It will be easy to add a listing for free ultrasound services.

Unfortunately, the state's fetal development pamphlet uses static photos and line art drawings. Women deserve an easy click to a state-sponsored site using actual video sonography at 2 week increments, as the bill requires, because deceptive abortion counseling and withholding of pertinent information still occurs. We took a recent call that a Kansas clinic falsely told a woman 10 weeks pregnant that her fetus was the size of a grain of rice, instead of truly describing the 3 inch little one with limbs, genitals and fingernails.

Clinic mandates

Kansas has 4 abortion clinics (see attachment). Legislative research confirms all 4 use ultrasound in the performance of abortion. This bill would require the clinic to offer, 30 minutes before the abortion, the choice to view the unborn's ultrasound or listen to heart monitoring. This can easily be worked into the legal protocol, which already requires a consultation with the practitioner 30 minutes before the abortion

Seeing an ultrasound gives a woman real-time medical information about her unique child. As heartfelt testimony today confirms, some women who were told the abortion just destroys "some tissue," suffer flashbacks and deep regret triggered by seeing an actual ultrasound for the first time-- which they were not shown prior to their abortion-- because they now realize the humanity of the unborn they had aborted. (see attached physician and mental health specialist statement about the reality of post-abortion trauma).



Kansas Affiliate of the National Right to Life Comm

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Attachment 6

Not surprisingly, the abortion industry is schizophrenic in this area. On the one hand they claim that women are too intelligent to be force-fed medical information from the state while simultaneously claiming women need protection from seeing a sonogram! They also say women should have the choice of entering an abortion clinic and on the other hand say once she is in the clinic she should not have any more choices because they would induce shame!

Nevertheless, polls show strong support for an ultrasound option. 16 states have enacted ultrasound legislation and at least 12 more are considering such bills this session. No litigation is underway against states that require an abortion clinic to offer women this choice.

Most Kansans are unaware that Wichita and Kansas City offer free, top-notch coordinated assistance for medically challenged pregnancies. As you heard today, Kansas City's Alexandra's House is a national model of pre-natal and post-natal 24/7 Hospice.

As you heard today, families facing pregnancies with severe or fatal fetal conditions should be informed how to get the best medical care, grief counseling and disability support systems. State law already requires information be received one day prior to abortion, and routinely supplying these additional contacts should not be a burden.

Although abortion is an elective procedure, studies indicate over 60% of abortions are coerced. Testimony from aborted women to Kansas House and Senate committees over the years confirms these situations are too common. (See attached booklet on abortion coercion).

Coercion takes many forms. It runs the gamut from agenda- or profit-driven "counseling," personal pressure, or abuse of authority in schools, social-service agencies, hospitals or even churches ... to job loss, housing discrimination, a predator's cover-up or an abuser's threats that can escalate to violence or homicide – the leading killer of pregnant women in America.

The fact that Michelle Armesto-Berge had recently reached age 18 did not protect her from abuse of parental authority. Lacking financial independence, her parents offered free tuition and a new car, while threatening violence to her fiance's family. Tiller's clinic used religious coercion to push her abortion.

5 years ago, we received a desperate call from a pregnant woman, in her 40s, whose Topeka employer made a mandatory abortion appointment for her! Apparently, her co-workers decided that her office conversations about a rocky marriage warranted quick, aggressive action. Even worse, the Kansas clinic agreed to rush her through without a physical or the 24 hour waiting period that the woman knew was the law. We got her an appointment with an attorney to protect her job, and she did not abort.

The Woman's Right to Know & See bill will require abortion facilities to post a prominent sign onsite that a forced abortion decision is illegal and that law enforcement is available to protect against real or threatened abuse. Will this sign empower every woman being unduly pressured to walk out of the clinic? We don't know. But it will plant the seed that her situation is not unique and is illegal. And that she can resist and get some protection.

Moreover, it will warn clinic staffers that they should think twice about participating in any abortion where the woman displays fear, expresses resistance, or shows signs of harassment or victimization. Sad to say, some clinic staffers have ignored those red flags and misinformed a woman she could not leave, or worse, forcibly held a woman down on the table for the abortion.

Please continue our 1997 promise to women to provide full informational resources, by passing HB 2076.

Kathy Ostrowski, legislative director, Kansans for Life

Forced Abortion in America

A Special Report

64% INVOLVE COERCION, WHICH CAN BECOME SEVERE

Women pay a high price for a choice that's not a choice.

- When his wife refused to abort, her husband jumped on her stomach until their baby died . . .
- A daughter was pushed into an abortion clinic at gunpoint by her mother . . .
- Outside a parking garage, a physician shouted, "I'm giving you an abortion!" as he injected the mother of his child with an abortifacient drug . . .
- A school counselor ridiculed the student and put her on the weekly bus to the abortion clinic . . .
- A homeless woman was denied shelter until she had an abortion . . .
- A 13-year-old was returned to her molester after he took her in for a cover-up abortion . . .
- 3 sisters were raped repeatedly and forced into repeat cover-up abortions for nearly a decade . . .
- A waitress was fired after refusing to abort . . .

65% SUFFER TRAUMA. SUICIDE 7X HIGHER.

The pain didn't go away. It just waited.

- PART I – THE COERCED ABORTION EPIDEMIC
Not Informed, Counseled or Screened for Coercion.
- PART II – COERCION CAN LEAD TO VIOLENCE
Pregnancy Places Women at Higher Risk of Attack
- PART III – VIOLENCE CAN LEAD TO MURDER
Murder: The #1 Cause of Death for Pregnant Women
- A NIGHTMARE THAT WON'T END
"I screamed that I did not want the abortion."

Elliot
INSTITUTE

www.afterabortion.org

House Fed & State Affairs

Date: 2-11-09

Attachment 7

Forced Abortion — Part I

Most involve coercion, which can become violent.

The Un-Choice:

64% involve coercion.¹ Pressure can become violent.² 67% not counseled.¹ 65% suffer trauma.¹ Suicide 6 times higher.³

Forced Non-Choice ... "I'll blow her brains out."

Intense pressure to abort can come from husbands, parents, doctors, partners, counselors, or close friends and family. They may threaten or blackmail a woman into abortion. These are not idle threats. Coercion can escalate to violence. Women who resist abortion have been beaten, tortured and killed. One husband jumped on his wife's stomach to force an abortion. A mother forced her daughter at gunpoint to go to the abortion clinic. A woman was forcibly injected by the baby's father with an abortifacient drug.²

Unwanted Non-Choice ... Their Choice, Not Hers.

Reasons women give for having abortions:⁴

- Forced by mother
- Husband or boyfriend persuaded me
- Would have been kicked out
- Lack of support from society
- Father opposed
- No other option given
- Loss of family's support
- Clinic persuaded me
- In 95% of all cases, the male partner played a central role in the decision.⁵
- 45% of men interviewed at abortion clinics recalled urging abortion, including 37% of married men.⁶
- In the above study, men justified being the primary decision maker, regarding the abortion.⁶
- 64% of women who aborted felt pressured by others.¹

Coerced Choice ... Taken to the Clinic to Make Sure She Keeps the Appointment

A former abortion clinic security guard testified before the Massachusetts legislature that women were routinely threatened and abused by the boyfriends or husbands who took them to the clinics to make sure they underwent their scheduled abortions.⁷ Many women are also pressured by clinic staff financially rewarded for selling abortions.⁸

Forced Choice ... Threats Can Escalate to Violence or Murder — the Leading Killer of Pregnant Women

The pressure can escalate. Many pregnant women have been killed by partners trying to prevent the birth, and being pregnant places women at higher risk of being attacked.⁹ Murder is the leading cause of death among pregnant women.¹⁰ 92% of women surveyed list domestic violence and assault as the women's issue that is of highest concern to them.¹¹

Uninformed Non-Choice ... "When I learned the truth, I can't tell you how betrayed I felt."

- 54% were unsure of their decision, yet 67% received no counseling beforehand.¹
- 84% received inadequate counseling beforehand.¹ 79% were not told about alternatives.¹
- Many were misinformed by experts about fetal development, abortion alternatives or risks.¹²
- Many were denied essential personal, family, societal or economic support.¹²

Unsafe Choice ... American Voters Concerned About Coercion and Risks; Support Research and Screening.

Nearly half of voters believe coerced abortion is common. They'll support candidates who advocate legislation holding abortionists liable for failing to screen for evidence of coercion.¹³ Nearly 80% of abortions take place in non-hospital facilities, ill-equipped for emergency care.¹⁴ Americans are kept in the dark about unwanted abortions, risks and risk factors.

The Aftermath. Women Pay a High Price.

Trauma.¹ Injury.¹ Grief. Death from All Causes.¹⁷ 6 Times Higher Suicide.³

- 31% had health complications afterwards.¹
- 65% higher risk of clinical depression.¹⁵
- 3.5x higher risk of death from all causes.¹⁷
- 65% suffer multiple symptoms of post-traumatic stress disorder.¹
- 10% have immediate complications, some are life-threatening.¹⁶
- Suicide rates 6 times higher if women abort vs. giving birth.³

Young Women Forced to Abort

By Parents, Husbands, Molesters . . . Even Pastors and School Officials

- **Mother Charged with Forcing 15-Year-Old at Gunpoint into Clinic**

In Florida, Glenda Dowis was sentenced to two years community service after she pleaded guilty to forcing her daughter at gunpoint to go to an abortion clinic. According to a staff member, Dowis told clinic workers that if her daughter did not have an abortion, "I'm going to blow her brains out." Clinic workers called police, but police said Dowis told staff to perform the abortion even though her daughter "may seem a bit teary."

| She pleaded with her parents to let her have the baby.

- **Molester Buys Abortion—Twins Get Seven More Years of Rape**

In New Orleans, a 41-year-old man received two life sentences for raping his girlfriend's twin daughters and using abortion to cover up his crimes. The victims testified that the assaults began when they were 10 and continued for seven years. One of the girls said she had two abortions after she became pregnant from the man when she was 15 and 17. She said the man paid for one abortion, unbeknownst to the mother. Her mother, who was told that the girl was raped by a date, paid for the second abortion.

- **Lawsuit: School Counselor Bypassed Parents, Law to Arrange Student's Abortion**

Howard and Marie Carter accused Pennsylvania school guidance counselor William Hickey of coercing their 17-year-old daughter into undergoing an abortion, which was done out of state to avoid parental consent laws. The suit noted that when the teen expressed doubts, Hickey told her, "someday you'll look back on this and laugh."

- **13-Year-Old Returned to Molester After First Of Two Abortions**

In Arizona, a judge found Planned Parenthood negligent for failing to report an abortion performed on a 13-year-old girl who was sexually abused by her 23-year-old foster brother. Shawn Stephens took the girl to the clinic, but Planned Parenthood did not notify authorities until the girl returned six months later for a *second* abortion. A lawsuit alleged that the girl was subjected to repeated abuse and a second abortion because of the clinic's failure to report suspected abuse. Stephens was sentenced to prison and lifetime probation.

| Counselor: "Someday you'll look back on this and laugh."

- **Judge Restrains Parents in Daughter's Forced Abortion Case**

In Jackson, MS, a judge issued a temporary restraining order against the parents of a 16-year-old girl after they allegedly tried to force her into having an abortion. The girl said she pleaded with her parents to let her have the baby but they made an appointment for her at a local abortion clinic.

- **Mother Helps Son Use Abortion to Cover Up Statutory Rape of 12-Year-Old Girl**

Pennsylvania mother Joyce Farley began campaigning for a federal law to prevent anyone from taking a minor out of state for an abortion in order to circumvent parental consent laws—after her 12 year-old daughter was taken out of state for a secret abortion by Rosa Hartford, the mother of the 18-year-old who had impregnated her. Joyce learned of the abortion after her daughter began experiencing complications, including severe pain and bleeding. Hartford's son was later convicted for interfering in the custody of a minor.

- **Abuser Poses as Father of 16-Year-Old Girl in Order to Obtain Abortion**

David A. Gillis, 36, was sentenced to 18 months to two years in prison for felony child abuse after he posed as the father of a 16-year-old girl whom he was sexually abusing and signed consent forms for an abortion at an Omaha abortion clinic. Gillis claimed he was remorseful about the situation, but prosecutors said he continued to write to the girl while in jail and filed frivolous protection orders against her parents.

- **Parents Use At Least 10 Abortions to Cover Up Repeated Sexual Abuse of Daughters**

The parents of three teenaged Baltimore girls pleaded guilty to three counts of first-degree rape and child sexual abuse. The father had repeatedly raped the three girls over a period of at least nine years, and the rapes were covered up by at least ten abortions. At least five of the abortions were performed by the same abortionist at the same clinic.

- **Juvenile Prison Sued Over Sexual Abuse, Coerced Abortions of Young Girls**

Nine women who had been detained at a state detention facility for juvenile girls in Chalkville, Alabama, filed a lawsuit alleging that male guards at the facility watched them take showers, strip-searched them, pressured or forced them into having sex, beat them, and pressured those who became pregnant into having abortions. More than three dozen girls reportedly made similar allegations, and attorneys said they received additional complaints from women who had been held at Chalkville up to 20 years earlier.

| She told them to do the abortion even if her daughter was “a bit teary.”

- **Men Charged With Molesting Several Girls; One Victim Testifies She Underwent Abortion at 13**

Two Indiana men—Billy Banks, Sr., 67, and his son, Jimmy Lou Banks, 40—were arrested and charged with sexually molesting several young girls. A woman told police that Billy Banks began molesting her in 1965 when she was 5 years old, and that she had an abortion at 13 after she became pregnant by him.

- **Woman: Abuser Punched Her in Stomach After Forced Abortion Doesn't Work; Causes Miscarriage**

Augencia Jasso of New Mexico was charged with physically and sexually abusing a young girl over a number of years, beginning when she was seven and living in Mexico. The woman told police that the abuse continued when she moved to New Mexico and that Jasso repeatedly threatened to kill her and her family if she told anyone. She also said that when she became pregnant, Jasso took her to a Planned Parenthood office for an abortion, but after finding that the office was closed, he punched her in the stomach, causing her to miscarry.

- **Man Sentenced to Prison for Ten Years of Sexual Abuse; Victim Had Abortion Out of Fear**

Michael Paul Weber of Philadelphia was sentenced to 20-40 years for raping and physically abusing a young girl in his care over a period of ten years, beginning when she was 8 years old. The girl said that when she became pregnant, she had an abortion out of fear of being further abused by Weber.

Women Blackmailed into Abortion

Homelessness, Humiliation, Solitary Confinement or a Push Downstairs

- **Actress Fired For Being Pregnant; TV Producer Wonders Why She Didn't “Just Abort”**

An actress won a pregnancy discrimination suit against the producers of the Fox TV show *Melrose Place* after she was fired from the cast because she was pregnant. Her lawsuit alleged that one of the show's producers remarked, “Why doesn't she just go out and get an abortion? Then she can work.”

- **Basketball Coach Accuses School of Firing Her for Refusing to Have an Abortion**

An assistant women's basketball coach won a settlement against the University of California at Berkeley, accusing the head coach of firing her after she refused to quit or to have an abortion. She later gave birth to a son. She sued for sexual discrimination and breach of contract for being forced to choose “between her child and a paycheck.”

- **Homeless Woman Reports Being Denied Shelter Until She Submits to Abortion**

A woman won a \$25,000 settlement from Emergency Shelters, Inc., of Richmond, VA, after she filed a lawsuit charging staff members with coercing her to get an abortion by telling her that the shelter did not provide services

for pregnant homeless women. She stated that a staff member drove her to the bank to withdraw money for the abortion, then took her to the abortion clinic.

- **Woman Wins Settlement After Accusing Boss of Coerced Abortion and Threats**

A Minnesota woman won an out-of-court settlement for an undisclosed amount from her employer, Duluth Little Stores, after her boss tried to pressure her to abort. The woman said her boss mistreated her while she was pregnant and threatened to push her down the stairs during her sixth month of pregnancy.

“Why doesn’t she just get an abortion? Then she can work.”

- **Woman Sues Prison After Forced Abortifacient Drug Kills Her Child**

An inmate imprisoned on a bank fraud conviction in Hawaii sued the Oahu Correctional Center for forcibly aborting her child. According to the lawsuit, when the woman arrived at the center she was injected with a birth control drug in her abdomen, even though she told the nurse she was pregnant. The woman said she was told she would be put in solitary confinement and labeled a troublemaker if the intake process did not go smoothly.

- **Medic Says She Aborted After Boss Threatened to Fire Her**

Three paramedics accused Washington, D.C. Assistant Emergency Medical Services Chief Samantha Robinson of pressuring them into having abortions by telling them they could be fired if they became pregnant their first year on the job. One woman told authorities she aborted despite her beliefs because she was afraid of losing her job. She said Robinson told her “she had a choice to make.” Robinson later resigned from her job.

- **Law School Grad Uses Sex Videotape in Attempt to Blackmail Girlfriend into Abortion**

Nicholas Griffin, a Florida law school graduate, was sentenced for trying to force his ex-girlfriend to have an abortion. He hired friends to blackmail his girlfriend by threatening to mail copies of a videotape the couple had made of themselves having sex to the woman’s family, friends, and employer unless she had the abortion. The woman later gave birth to a girl.

Boss: “You have a choice to make.”

- **Elite Model Agency Founder Accused of Sexually Abusing a Minor and Arranging Her Abortion**

John Casablancas, founder of Los Angeles’ prestigious Elite modeling agency, was named in a sex abuse lawsuit. An aspiring model said he began sexually abusing her when she was 15 and arranged for her to have an abortion when she became pregnant.

- **Restaurant Sued for Terminating Employee Who Became Pregnant**

A restaurant employee in Long Island filed a lawsuit against her employer alleging that she was terminated when she became pregnant. The woman said she was told to “consider her options” when she told a supervisor she was pregnant. She later gave birth to a girl.

- **Woman Files Pregnancy Discrimination Lawsuit Against Maternity Clothing Retailer**

Mother’s Work, a maternity clothing retailer, was the subject of a pregnancy discrimination lawsuit charging that they fired employees after they became pregnant. One woman, a former district manager, accused the vice-president of firing her during her 37th week of pregnancy after telling her she wouldn’t be able to handle her job.

- **Funeral Home Employee Wins Lawsuit Over Coerced Abortion**

A funeral home employee in Florida filed a lawsuit against Fisher-Pou Funeral Home, saying that her supervisor badgered her into an abortion because her baby was biracial. The woman and three other former employees

accused Deborah Flannagan of pressuring the woman to abort, making financial arrangements and taking her for the abortion. The woman said she was later fired from her job for interracial dating.

For More Examples

These are only a sampling of the pressures faced by girls and women whose unplanned pregnancies inconvenience others. For more information and examples of coerced abortion and pregnancy- and abortion-related violence, visit:

| abortionviolence.com
| sba-list.org
| theunchoice.com

Forced Abortion — Part II

Coercion Can Lead to Violence

Coercion Can Escalate to Violence if Women Won't Abort

Pregnancy Places Women at Higher Risk of Attack⁹

64% of abortions involve coercion,¹ and this sometimes includes threats of physical abuse from partners—or even parents—who don't want the child. Girls have been physically pushed into clinics and restrained when they tried to escape their abortion.⁷ Women have endured violently forced miscarriages, which sometimes result in murder—the leading killer of pregnant women.¹⁰ Other women resort to abortion because they believe it is the only way to stop the abuse.

Men have forcibly performed abortions by switchblade, gunshot, and other violent methods

Coercion often involves direct or indirect threats of physical violence. Women who refuse to abort have been subjected to every manner of abuse, from forced injections to stabbings, beatings, bombings, gunshots, and strangulation.

According to one study of battered women, the target of battery during their pregnancies shifted to their pregnant abdomens.¹⁸ Indeed, the leading cause of death among pregnant women is murder.¹⁰ In many cases, it is known that these women were killed solely because their killers wanted to stop them from giving birth to their children.¹⁹

In a recent poll, 92% of women cited preventing domestic violence as their highest priority.¹¹

NOTE: Some of the cases below contain graphic descriptions of violence.

Women Who Choose Life Subjected to Violent Forced Abortions

- **Doctor Stabs Girlfriend with Syringe Outside Parking Garage to Force Abortion**

New York physician Stephen Pack was sentenced to prison after repeatedly stabbing his girlfriend with a syringe filled with an abortion-inducing drug. A witness said that Pack shouted, "I'm giving you an abortion!" as he forced the woman to the ground near a hospital parking garage. She later gave birth to a healthy boy.

- **Three Hit Men Hired to Kill Unborn Baby After Woman Refuses Abortion**

A pregnant Arkansas woman was within days of her due date when she was beaten and kicked in the abdomen by three men, killing her unborn baby girl. She said she pleaded for her child's life as her attackers told her: The woman's boyfriend, Eric Bullock, was convicted of planning the attack.

- **Man Beats Girlfriend For Refusing to Go into Abortion Clinic**

Andrew Jerome Gaither pleaded guilty to two counts of simple assault for beating up his girlfriend outside an abortion clinic in Washington, DC. Witnesses said that Gaither beat the woman after she refused to enter the clinic after speaking with pro-life advocates outside. She later gave birth to a healthy baby.

- **Man Charged with Assaulting Wife Who Says She Had Refused Abortion—Unborn Child Dies**

In New Jersey, Drew Stauffenberg was charged with aggravated assault for allegedly attacking his wife. His wife said he squeezed and punched her abdomen and forced her out of the house. She also said that Stauffenberg had "expressed a wish for her to have an abortion" after he found out she was pregnant. Doctors determined that the 10-week-old unborn baby died as a result of injuries to the amniotic sac and uterus.

- **Boyfriend Breaks into Home, Assaults Girlfriend Who Had Refused Abortion**

Jeremy Powell pleaded guilty to forcing his way into his girlfriend's New York house and beating, kicking, and

punching her after she refused to have an abortion. The victim, who was three months pregnant, told police Powell said to her, "I'm going to beat that baby out of you."

- **Pregnant Girlfriend Tied to Chair During Gas Explosion; Boyfriend Charged with Attempted Murder**

In Buffalo, NY, David Elersic was charged with the attempted murder of his pregnant girlfriend. Police said he tied her to a chair and disconnected the gas stove pipe in an apparent murder-suicide attempt after she told him she was pregnant and intended to keep the baby. The woman and her unborn baby survived the explosion, although she suffered severe burns.

- **Boyfriend Charged in Stabbing Pregnant Woman Who Says He Demanded an Abortion**

In Nevada, Jesus Villagomez was charged with manslaughter for repeatedly stabbing his pregnant girlfriend in the abdomen, killing her 18-week-old unborn baby. The woman told police he had demanded she have an abortion. Villagomez was sentenced to 18 years in prison for causing the unborn child's death, and ordered to pay the woman's medical bills.

| "Your child is dying tonight."

- **Connecticut Man Demands Abortion, Rapes Girlfriend, Forces Abortifacient Drug**

Edward Sandoval was convicted of seven felony charges in Connecticut for raping his pregnant girlfriend and trying to abort her baby by forcing her to take misoprostol, a labor-inducing drug. The woman told police that he had demanded she have an abortion.

- **Pregnant Woman Blindfolded, Tied Up, and Injected in Forced Abortion**

Mark Redeker, a second-year ob/gyn resident in New York, was charged with assault and unauthorized practice of medicine for blindfolding his girlfriend, tying her up, and injecting her with a drug that left her unconscious and bleeding. She later suffered a miscarriage.

- **Man Hired to Forcibly Induce Miscarriage**

In Oklahoma, Andrel Singleton told police that Shawn Lawrence hired him and another person to assault Lawrence's pregnant girlfriend and cause her to miscarry. The woman was pistol-whipped and repeatedly kicked in the stomach.

- **Police Charge New Yorker for Beating, Raping, Attempting Forced Abortion on Girlfriend**

David Lyons was charged with sexual abuse, rape, stalking, and attempted abortion after police said he beat and sexually assaulted his pregnant girlfriend in an attempt to force an abortion.

- **Man Poisons Girlfriend's Drink to Induce Miscarriage**

In Missouri, Michael T. Bullock was convicted after he put poison in his girlfriend's drink in an attempt to induce a miscarriage. Police said he had told friends he poisoned his girlfriend because he didn't want the baby. His 19-year-old girlfriend later delivered a healthy baby.

| He poisoned his girlfriend because he didn't want the baby.

- **Man Arrested for Stabbing Pregnant Girlfriend, Killing Unborn Child**

In South Dakota, a man was arrested for stabbing his girlfriend in the abdomen, resulting in the death of her unborn child. Sundance Medicinehorn Keeble faced assault and fetal homicide charges. His girlfriend, who survived the attack, was 4 to 5 months pregnant. The prosecutor said that Keeble "intentionally stabbed the woman in the stomach, causing the death of the unborn child."

- **Woman Testifies That Husband Beat Her with Log for Refusing Abortion; Newborn Dies**

A Missouri woman testified that her husband beat her with a log after she refused to have an abortion. Jason Hawkins was charged with second-degree murder after their son was born three months premature and died.

- **Man Charged with Beating Nine-Months-Pregnant Girlfriend Until Twins Were Stillborn**

In Norwood, NY, Anthony Puglia was charged with assault and forced abortion after he allegedly beat his pregnant girlfriend. Police said he kicked and punched her in the abdomen. Her nine-month-old unborn twins were stillborn.

- **Man Laces Girlfriend's Drink with Drug Used to Induce Labor in Farm Animals**

In New York, Danny Court was sentenced to prison after pleading guilty to lacing his pregnant girlfriend's drink with a drug used to induce labor in farm animals. His 19-year-old girlfriend and her baby survived.

| "I'm giving you an abortion!"

- **Man Charged with Kidnapping; Woman Says He Told Her He Was Taking Her for Abortion**

Usbaldo Palomino of Nevada was charged with kidnapping, domestic battery, aggravated stalking, and leaving the scene of an accident in an incident involving a woman who was eight months pregnant. The woman said he punched her in the face and forced her into the truck, which he then crashed into a house as he was leaving the area, causing her to be knocked unconscious after her head struck the dashboard. She also told police that Palomino struck her and that he told her he was taking her to Reno for an abortion.

- **Woman Refuses Abortion; Baby's Father Kicks Her in Stomach in Attempt to Cause Miscarriage**

In Michigan, Justin Siekierk was charged with assaulting a pregnant woman and intending to cause a miscarriage or stillbirth. The woman testified that she and a friend went to Siekierk's apartment to talk about the baby, but after she refused to have an abortion, Siekierk threw her into some bushes and began punching her and kicking her in the abdomen with steel-toed boots.

- **Boyfriend Charged After Shooting Pregnant Woman; Unborn Child Killed**

In Indiana, 25-year-old Mark Joseph Griffin was charged with first degree feticide and three counts of attempted first degree murder for allegedly shooting his ex-girlfriend, killing her eight-month-old unborn baby. Police said Griffin shot her because he believed she was pregnant with another man's baby.

| "I'm going to beat that baby out of you."

- **Man Arrested Twice for Assault, Attempted Murder of Pregnant Woman**

In St. Louis, George Villarreal III was sentenced to five years in prison for assaulting his pregnant girlfriend and causing the death of his unborn twin daughters. He was released from prison after two years, but was arrested again for attempting to murder the same woman, who had married him and was five to six months pregnant at the time of the murder attempt.

- **Abortionist Charged with Raping and Forcing Abortion on His Wife**

Dr. Theodore Lehrer, a Florida abortionist, had his medical license suspended after he was charged with performing an abortion on his wife against her will. Lehrer was arrested after his wife told police that he handcuffed and gagged her, raped her, and then forcibly aborted her 11-week-old baby in the bathroom of their home. However, charges were dropped against Lehrer after his wife, who was suffering from illness, refused to testify against him, saying she was too sick to do so.

- **Man Charged With Assaulting Pregnant Girlfriend Told Police She Was Trying to Kill Herself**

Albert J. Danos of Louisiana was charged with assaulting his pregnant girlfriend, then telling police she tried to commit suicide. Danos' girlfriend, who suffered multiple injuries, told police that he pushed her, knocked her to the floor, punched her, kicked her in the side and stomach, and tried to shoot her, telling her that her baby did not deserve to live.

- **Man Charged with Tearing Unborn Child from Wife's Womb**

Robert Hollis of Kentucky was charged with chasing his wife into a barn, shoving his hand into her womb, and tearing her seven-month old unborn child from the wall of the uterus. The 2-pound baby was delivered dead later that day.

- **Woman Beaten, Punched in Abdomen by Husband Days Before Delivery Date**

A Milwaukee woman was days away from her delivery date when her estranged husband beat her, grabbed her by her hair, and punched her in the abdomen. Her unborn son died of bleeding caused by blunt force trauma. Glendale Black was convicted of first degree assault and false imprisonment, but Wisconsin did not at that time allow prosecution for the death of the unborn child. The woman later testified before Congress that Black said in an interview that if the state had a law protecting unborn children, he would not have attacked her child.

- **Police: Woman Tried to Hire Hit Man to Kill Rival's Baby**

Melinda Ann Elem was indicted for attempting to hire a hit man to kill a woman who was seven months pregnant. Police said that Elem wanted the woman's baby killed because she believed the woman was pregnant by Elem's husband, and she did not care if the mother lived or died in the process.

| "Your baby doesn't deserve to live."

- **Man Charged with Repeatedly Punching Pregnant Girlfriend in the Abdomen After She Refuses to Abort**

In Massachusetts, Richard Andrade was charged with repeatedly punching his pregnant girlfriend in the abdomen after she refused to abort. Andrade was charged with felony assault.

- **Pennsylvania Man Imprisoned for Punching Pregnant Girlfriend in Stomach**

A Pennsylvania woman's boyfriend punched her in the stomach when she was three months pregnant. Ronald Loughney pleaded guilty to assault after prosecutors dropped charges for aggravated assault against the unborn child, who survived.

- **Pregnant Woman Miscarries After Being Punched and Kicked by Boyfriend**

Clayton R. Tucker of Malone, NY, pleaded guilty to second-degree abortion and was sentenced to two to four years in a state prison for repeatedly punching and kicking his pregnant girlfriend in the abdomen. His girlfriend suffered a miscarriage the next day. Prosecutors said Tucker shouted that he wanted to kill the baby.

- **New York Man Arrested for Stabbing of Pregnant Woman**

Sean Brown of Albany was convicted for repeatedly stabbing his pregnant girlfriend in the abdomen in what prosecutors said was an attempt to make her lose the pregnancy. Brown was sentenced to 11 years in prison for assault and up to three more years for attempting to kill the unborn child. His girlfriend and the baby both survived.

| She was beaten in the abdomen with a baseball bat.

- **Caught on Tape: Doctor Tries to Abort Ex-Girlfriend's Baby with Abortifacient Drug**

Ohio police videotaped Dr. Maynard Muntzing slipping an abortifacient drug into his ex-girlfriend's drink. The woman went to the police after she became ill several times after visiting Muntzing. She later miscarried. Muntzing received five years in prison for attempted abortion, and his wife, Tammy, who purchased the drug, was also convicted.

- **Hit Man Shoots Pregnant Woman; Mother and Wounded Baby Survive**

A Chicago woman was 30 weeks pregnant when she was shot repeatedly by a masked gunman as she was walking home with children from a nearby elementary school. Her 3-pound, 4-ounce baby daughter was delivered by Caesarean section and survived despite having been wounded in the attack. Doctors said the baby helped save her mother's life by shielding the woman's vital organs. Jimmy Spencer, 32, faced murder charges. Police said that Spencer, who was not the baby's father, had been hired to carry out the shooting.

- **Attorney Tries to Hire Hit Man to Kill Girlfriend's Unborn Twins**

Florida attorney David Luskin was convicted for attempting to hire a hit man to beat his pregnant girlfriend in the stomach with a baseball bat after she refused to have an abortion. The woman, who was pregnant with twins, asked for leniency in

Luskin's sentencing, but said later that she did so before she heard a tape of Luskin asking a prostitute how he could hire someone to kill his girlfriend.

- **Man Charged with Beating Pregnant Girlfriend Because She Wouldn't Abort**

Authorities in Fayette, GA, charged Michael Antonio Glass with fetal homicide after he allegedly beat his pregnant girlfriend, causing the deaths of her four-month-old unborn twins. Police said that Glass had been angry at his girlfriend because she refused to have an abortion.

- **Man Charged in Beating of Woman and Death of Unborn Child**

In St. Louis, Lawrence Green, 26, was charged with beating a pregnant woman, causing her to go into premature labor. The baby lived just eight minutes outside the womb. Green faced charges of involuntary manslaughter after the medical examiner ruled the baby's death a homicide.

- **Pregnant Woman Loses Six-Month-Old Unborn Baby After Assault; Boyfriend Charged**

A Troy, NY woman lost her six-month-old unborn child after being beaten, allegedly by her boyfriend. Darren Jones was charged with assault and reckless endangerment, but no murder charges were filed because prosecutors said they could not prove the baby died as a result of the attack.

| The doctor drugged three women and forcibly aborted them.

- **Man Could Face Up to 65 Years for Charge of Kidnaping, Assaulting Pregnant Girlfriend**

Wisconsin police arrested Jake Perry after his pregnant girlfriend told them that he held her against her will for four hours at her sister's home, where he slapped her, threw her into a box of plates, and jabbed her in the stomach, head, arms, and legs. The woman, who was two months pregnant, later suffered a miscarriage.

- **Abortionist Convicted of Forcibly Aborting Women He Impregnated**

Indianapolis abortionist Pravin Thakkar was convicted in three cases in which he seduced and impregnated women and then performed abortions on them without their consent. One woman testified that Thakkar drugged her and aborted her eight-month-old baby at his home. She said she awoke briefly to hear a baby crying, but Thakkar told her the baby was stillborn. The child's body was never found. Thakkar was also convicted of tax evasion and numerous counts of improper sexual behavior towards his patients—including raping one of his former patients in her home. He was sentenced to 16 years in prison.

- **Man Rapes and Tortures Pregnant Girlfriend, Her Baby Dies**

David A. Enis of Milwaukee was convicted of beating, raping, and torturing his pregnant girlfriend and holding her captive in his home for two days. His girlfriend, who was eight-and-a-half months pregnant, was tied to a bed, bitten, burned with cigarettes, and beaten with an electrical cord. She delivered a stillborn baby after Thompson finally summoned an ambulance for her. Thompson pleaded guilty and was sentenced to 30 years in prison.

- **Man Charged With Beating Daughter Who Refused Abortion**

An Ohio man admitted to police that he beat his 16-year-old daughter for refusing to have an abortion. Moses Cade faces charges of domestic violence and endangering children. Cade allegedly told police that he planned to keep the girl locked in the house until he could take her for an abortion and that he beat her a metal broomstick when she refused. The girl told police her father also punched her in the face and stomach.

- **Man Goes Missing After Being Charged in Shooting of Pregnant Girlfriend**

A Lansing, Michigan man fled from police after prosecutors authorized charges against him for allegedly pistol-whipping his pregnant girlfriend and shooting her in the abdomen, missing her 5-month-old unborn child by inches. The mother was hospitalized and placed under police protection after her boyfriend disappeared. Prosecutors said he could face up to

life in prison if convicted.

- **Father Stages Carjacking, Has Mother and Unborn Child Shot**

In Ohio, Paul Nino Tarver II was convicted of arranging to have his pregnant girlfriend shot during a staged carjacking so he wouldn't have to be a father to her child. The woman survived the shooting, but her 3-month-old unborn baby died.

For More Examples

These are only a sampling of the pressures faced by girls and women whose unplanned pregnancies inconvenience others. Refer to these web sites for current news, information and more examples of coerced abortion and pregnancy- and abortion-related violence:

| abortionviolence.com
| sba-list.org
| theunchoice.com

Forced Abortion — Part III

Violence Can Lead to Murder

Violence Can Escalate to Murder if Women Don't Abort

- Murder is the leading cause of death among pregnant women.¹⁰
- It is not unusual for a pregnancy to be wanted by the woman but unwanted by the man.
- He may not want the long-term costs of supporting a child, the loss of his “freedom” or being tied down with parental responsibilities, or a birth that might expose an affair, a rape, or the sexual abuse of a minor. Whatever the reason, some men will become increasingly pressuring, abusive, and violent until they get their way: a dead baby, even if it also requires killing the mother.
- If so, the woman can feel tremendous, often life-threatening, pressure to abort.

Life-Threatening Pressure to Abort

- Pregnancy places women at higher risk of being attacked.⁹
- Women understand that threats of violence are real. Preventing domestic violence is their top concern.¹¹
- According to one study of battered women, the target of battery during pregnancy shifted to their abdomens.¹⁸ The leading cause of death among pregnant women is homicide¹⁰ and in many cases it is known that the violence happened solely to prevent birth.¹⁹

NOTE: Some of the cases below contain graphic descriptions of violence.

Teens Who Refuse to Abort Have Been Murdered

- **Man Stabs 15-Year-Old Girl Who Refused Abortion, Frozen Body Found at Rest Stop**
Kevin Robinson, 38, was sentenced to life in prison for killing a pregnant 15-year-old girl. She was stabbed multiple times and her frozen body was later discovered at a Wyoming rest stop. Prosecutors said that Robinson had gotten the teen pregnant and that he killed her for refusing to abort.
- **Man Charged with Shooting Teen in Head After She Refuses Abortion**
A pregnant 17-year-old was shot in the head in her apartment in Greensboro, NC. Her boyfriend, 21-year-old Shawn Kristopher Holliman, was sentenced to life without parole for her murder. Police said he killed the teen because she refused to have an abortion and he didn't want to pay child support.
- **Teen Charged with Shooting Pregnant Girlfriend; Sister Finds Her Half-Conscious on Park Bench**
In New York, an 18-year-old girl was shot in the head just two weeks before she was due to deliver her baby, allegedly by her boyfriend, 19-year-old Warren Teasley. The girl's sister found her slumped on a park bench, bleeding and half-conscious. The teen and her unborn daughter died at the hospital.
- **15-Year-Old Pregnant Girl Jammed with Sticks, Beaten, Crushed with 30 Lb. Boulder**
In Colorado, 21-year-old Michael Baldwin confessed to luring his pregnant teenage girlfriend to a secluded area and killing her by assaulting her with sticks and a boulder. Police said Baldwin jammed a branch down his girlfriend's throat and jammed sticks into her other body cavities, then beat her and crushed her skull with a 30-pound boulder. She was 15 weeks pregnant. Baldwin pleaded guilty to first-degree murder and was sentenced to life in prison under a plea bargain that allowed him to avoid the death penalty.

- **Boyfriend Bludgeons Pregnant Girlfriend in Premeditated Murder**

Two teenage boys were convicted of planning and carrying out the murder of a pregnant 15-year-old girl, the girlfriend of one of them. The girl, who was 12 weeks pregnant, left a note for her parents and climbed out her bedroom window to meet Matthew Ryan Elliot for what she believed was a trip to an abortion clinic. Elliot confessed that he instead drove her to a deserted area and bludgeoned her to death with a metal pipe. He was sentenced to life in prison. Another teenage boy was convicted of helping to plan the murder, including digging a grave and buying plastic sheeting to wrap the teen's body.

- **16-Year-Old Girl Killed Because Boyfriend Thought She Was Pregnant and Didn't Want Baby**

In Georgia, Matthew Wiedeman and another teen stabbed and beat Wiedeman's girlfriend to death. Police said Wiedeman, who pleaded guilty, believed his girlfriend was pregnant and he didn't want her to have the baby. An autopsy showed she was not pregnant.

| The victim had finished fourth grade the day before she was murdered.

- **Pregnant 4th Grader Killed by Her Molester**

In Texas, a 10-year-old girl who had just finished fourth grade was killed, allegedly by a man who had been molesting her. Police said Edward LaGrone entered the home of the girl's family and shot and killed her and two other women there. The girl was 17 weeks pregnant and her mother had notified police that LaGrone had assaulted her. Police said LaGrone had offered to pay an abortion and he wanted to stop the family from filing charges against him. He was sentenced to death for the murders.

- **Pregnant 15-Year-Old Rape Victim Killed and Burned**

Shannon Meschack of Dallas, TX, was arrested for killing a pregnant 15-year-old girl and attempting to burn her body. The girl's family said Meschack, who was more than 10 years older than the teen, didn't want her to have the baby. Meschack was not charged for the baby's death because the state's unborn victims law was not yet in effect.

- **Pregnant 15-Year-Old Shot to Death on School Bus—Boyfriend Charged**

In Missouri, a pregnant 15-year-old girl was shot to death on a school bus. Police said 29-year-old Mark Boyd hired Malic J. Nettles, 20, to kill her because Boyd already had two children and didn't want a third. Nettles allegedly boarded the school bus and opened fire, killing the teen and wounding the bus driver. Boyd was charged with murder for the deaths of the teen and her unborn baby.

- **16-Year-Old Taken to Deserted Field, Shot in Head, Left in Ditch—Boyfriend Charged**

Trevor Wayne Benson and Kelly D. McCarney of Oklahoma were charged in the murder of Benson's 16-year-old girlfriend, who was seven months pregnant. Police said that the two men took the teen, who had asked Benson to take a paternity test, to a deserted field and shot her in the head, leaving her body in a ditch. Benson and McCarney could be charged with murder for the unborn child's death under Oklahoma law.

- **Pregnant 14-Year-Old Stabbed in Abdomen, Neck, and Back; Believed to be Buried Alive**

In Boston, 21-year-old Kyle Bryant and 24-year-old Lord Hampton were charged with the murder of a 14-year-old girl who was seven months pregnant with Bryant's baby. Police said the two blindfolded the girl, struck her over the head and stabbed her repeatedly in the neck, abdomen, and back. She was then buried in a shallow grave, probably while she was still alive. The two men were charged with double homicide.

- **Pregnant Woman Hit Over Head with Skillet, Shot in Head**

A California man became the first person sentenced to death under California's fetal homicide law for arranging the death of his pregnant wife. Earlin Popham testified that Jerry Bunyard offered him \$1,000 to kill Bunyard's wife, who was a week away from the due date of her unborn baby girl. Popham testified that he broke an iron skillet on the woman's skull and then shot her in the head. Popham received 25 years to life in exchange for his testimony against Bunyard.

- **Pregnant Teen Shot in Kentucky, Body Found in Park**

In Kentucky, a pregnant 18-year-old girl was shot and her body found in a car at a park. The girl's family said that only hours before her death, they had watched an ultrasound video of her 22-week-old unborn baby. The teen's ex-boyfriend, Roger McBeath, was charged in her death.

- **Teen Strangled, Stoned, and Stabbed by Boyfriend Who Had Threatened to Kill Her if She Didn't Abort**

Sean Steele confessed to murdering his pregnant 15-year-old girlfriend by strangling her, dropping a rock on her body, and stabbing her with a broken beer bottle. Family and friends testified that Steele had threatened to kill the teen and her baby if she didn't abort.

- **Woman Refuses Abortion, Man Fulfills Threat and Kills Her with Pipe Bomb**

A pregnant Pittsburgh woman and her 7-year-old daughter were killed by a pipe bomb in their home on New Year's Day. The woman's ex-boyfriend, Joseph Miner, was sentenced to life in prison. Police said Miner had threatened to kill her when she refused to have an abortion.

- **Oklahoma City Woman Beaten and Shot After Refusing Abortion**

The body of a pregnant 21-year-old woman was found in a shallow grave in Oklahoma City. Twenty-one weeks pregnant, she had been shot twice and beaten. Police said Nathaniel Smith murdered her because she refused to abort and he didn't want to pay child support.

| The teen was probably still alive when she was buried.

- **Pregnant Woman's Body Found in Car Trunk, Husband Convicted**

The body of a Florida woman who was four months pregnant was found in the trunk of a car in a strip-club parking lot. Her husband, Joseph Peck, was convicted of killing her with a blow to the head, allegedly because she refused to have an abortion. According to court records, the woman told a counselor shortly before her death that Joseph was abusing her.

- **Woman Killed After Refusing Abortion, Her Body Burned**

Alfred E. Smith was sentenced to life in prison for killing his pregnant ex-girlfriend, then putting her body in her car and setting the car on fire. Prosecutors in Van Nuys, Louisiana said Smith killed the woman for refusing to abort because of her religious beliefs.

- **Boyfriend Shoots Pregnant Woman in Abdomen; Kills Her and Unborn Son**

In Toledo, Ohio, Terrance Davis was sentenced to life in prison for shooting his pregnant girlfriend in the abdomen, killing her and her unborn son. A witness testified that Davis had threatened to kill her's unborn child, and the woman's mother said Davis asked her to talk her daughter into having an abortion.

- **Pregnant Woman Hanged by Man Who Believed He Fathered Her Child**

In Houston, Dan Leach confessed that he murdered a woman whose death had been ruled a suicide. Leach reported that he had killed her because he thought he was the father of her baby. He faces up to life in prison if convicted.

- **Virginia Man Detonates Bomb to Kill Pregnant Girlfriend and Unborn Child**

Coleman Johnson, Jr., was sentenced to life in prison for killing his pregnant ex-girlfriend. She and her eight-month-old unborn child were killed by a bomb that was placed on her apartment steps and detonated by a model rocket engine.

- **NFL Star Arranged Girlfriend's Death to Avoid Child Support**

Rae Carruth, a former NFL player, was convicted for plotting the death of his pregnant girlfriend in a drive-by shooting. The 24-year-old woman was shot four times in the abdomen and died a month later. Prosecutors said Carruth, who was sentenced to 18 years in prison, wanted the woman killed so he wouldn't have to pay child support. The baby boy survived.

- **Pregnant Woman Dies from Gunshot to Head, Newborn Son Dies Two Weeks Later**

A pregnant Colorado woman died two days after her boyfriend, Daniel Self, shot her in the head. Doctors were able to deliver her unborn son, who died two weeks later. Self was charged in his girlfriend's death, but not that of her son, even though experts testified that the baby's fatal complications were a direct result of the shooting.

- **Missouri Man Stabs Woman to Death the Day Before Her Delivery Date**

Steven McBride was sentenced to two life terms for stabbing a pregnant 21-year-old to death just a day before she was due to deliver. The woman's unborn baby girl died of blood loss.

| Her boyfriend said the baby would ruin his life.

- **Utah Man Stabs Pregnant Girlfriend to Death**

Calvin Shane Meyers of Utah was convicted of two counts of capital murder for killing his pregnant girlfriend. The woman, who was 16 to 18 weeks pregnant, was stabbed to death and her body left near Utah's Rockport Reservoir, where it was discovered by a snowmobiler 16 days later.

- **Pregnant Woman Murdered by Boyfriend Who "Didn't Want the Child"**

A Colorado man confessed to beating his pregnant girlfriend to death and disposing of her body by running her car off a steep embankment into a grove of trees, where it was later found by three children. Herrera turned himself in and told the FBI that he killed the woman because he didn't want the child she was carrying.

- **Man Shoots Pregnant Girlfriend in the Head Because She Won't Abort**

A Cincinnati man, Tony Ringer, killed his pregnant girlfriend after she refused to have an abortion so he could marry another woman. Ringer shot his girlfriend in the head as she sat in her car with her seven-year-old daughter, who was uninjured. The woman and her six-week-old unborn child died. Ringer pleaded guilty and was sentenced to two consecutive nine-year prison terms, plus three years for using a gun during the crime.

- **Pregnant Mother Tied Up and Stabbed to Death by Boyfriend**

A St. Louis woman who was two-and-a-half months pregnant was tied up and stabbed to death in front of her 5-year-old daughter. The woman's boyfriend, Willis Bailey, Jr., was sentenced to life in prison for killing her.

| Police said he plotted her death to avoid paying child support.

- **Ex-Husband Shoots Pregnant Wife Twice in Abdomen; Kills Mother and Child**

A Salt Lake City man turned himself in for the death of his ex-wife, who was shot to death at her workplace. According to testimony, Roger MacGuire told a co-worker that morning that he was going to kill his wife. A judge ruled that MacGuire could be charged for two murders after prosecutors argued that the number of shots fired and their location—two struck the woman in the abdomen—showed his intent to kill both her and her unborn baby.

- **Pregnant Woman Shot in Head After Requesting Child Support**

A 20-year-old Arizona woman was three months pregnant when she was killed with a gunshot wound to the head. Authorities arrested Raymond Carrasco Garcia, who was believed to be the father of the unborn baby and also of the woman's one-year-old son. The woman's family told police that she had been trying to collect child support from Garcia.

- **Women Nearing Delivery Suffocated and Bludgeoned with Log**

A 22-year-old Bremard, WA woman was close to delivery and had named her unborn daughter when she was raped, tortured, and killed by her ex-boyfriend. Brodie Eric Walrad, received a life sentence for her murder, which took place in the home of the woman's parents. Police said that Walrad suffocated her and bludgeoned her with a log.

- **Abortionist Strangles Girlfriend After Learning of Her Pregnancy**

A California abortionist who was having an affair with a married woman was convicted of strangling the woman after learning she was pregnant. Prosecutors said the woman, a mother of two other children, had told Kevin Paul Anderson she was pregnant the day before he killed her. Anderson was convicted of second-degree murder.

- **Pregnant Woman Stabbed Repeatedly in Abdomen, Strangled to Death**

Gilberto Cano of California was charged with killing his pregnant girlfriend, who was stabbed repeatedly in the abdomen and strangled to death. Prosecutors said the nature of the stab wounds indicated that Cano clearly intended to kill the seven-month-old unborn baby girl. Two witnesses testified that Cano told relatives on the night of his girlfriend's death that he had "injured" or "done something bad" to her.

- **Pregnant Ohio Woman Stabbed to Death and Dumped in Ditch**

LaMarr Parr of Ohio was charged in the stabbing death his 28-year-old girlfriend, who was 10 weeks pregnant. Her body was found in a ditch the day after her death by two bicyclists.

- **Man Charged in Stabbing Death of Pregnant Girlfriend**

Wilson Campoverde was charged in the stabbing death of his 33-year-old pregnant girlfriend. She suffered a stab wound to her abdomen and bled to death from another stab wound in her throat. Campoverde was not charged in the unborn child's death.

| Her pregnancy hindered his career plans.

- **Pregnant Woman Killed in Front of Her Four-Year-Old Son**

Quenton Quortez Thompson of Milwaukee was convicted of shooting his pregnant girlfriend in the head. Thompson was convicted of first-degree intentional homicide and first-degree intentional homicide of the eight-month-old unborn child under Wisconsin's feticide law and sentenced to life in prison. The woman's four-year-old son witnessed the murder and identified Thompson as his mother's killer.

- **Single Mother Shot to Death, Boyfriend Charged**

A single mother who was four to five months pregnant with her third child when was shot in the head in her Baltimore-area apartment. Her boyfriend, Tjane Charneise Marshall, was charged with first- and second-degree murder in the deaths of the mother and the unborn child. According to court documents, Marshall had said the baby would "ruin his life" and that "he was going to do something about it."

- **Man Charged With Killing Pregnant Girlfriend, Stuffing Body in Trash Can That Washed Up in Field**

Jerry Lynn Stuart was charged with first-degree murder for allegedly beating his pregnant girlfriend to death. His 21-year-old girlfriend disappeared from her North Carolina home just days before her due date. Her dismembered body was later found in a duct-taped sealed trash can that washed up into a field after a heavy rainstorm.

- **Pregnant Woman Strangled; Boyfriend Didn't Want to Pay Child Support**

Eric Laquine Brown of Mississippi pleaded guilty to strangling his pregnant girlfriend and leaving her body in a burned out car in Memphis. Brown was sentenced to life without parole in his girlfriend's death and a concurrent 20 years for the unborn child's death. Prosecutors said he killed them because he didn't want to pay child support.

- **Man Shoots Wife in Head, Reportedly Because He Found Her Pregnancy Inconvenient**

Charles Stuart of Boston committed suicide after his brother revealed to police that Stuart had shot his pregnant wife in a staged carjacking, causing her death and the death of their unborn son. Stuart had claimed that the couple had been robbed and had apparently shot himself as well to make his story more convincing. He allegedly had not wanted the pregnancy because it hindered his career plans, and planned his wife's death in order to collect life insurance.

- **Pregnant Mother Murdered; Dies After Son Delivered**

A Virginia man who was convicted of assaulting his girlfriend on three separate occasions killed her just months after a judge freed him on a suspended sentence. Richard Johnson's girlfriend was pregnant at the time of her death and doctors managed to deliver her baby boy, but the mother never regained consciousness. Johnson was sentenced to life in prison for his girlfriend's death. The woman's mother was raising the child.

- **Connecticut Woman Killed Two Weeks Before Due Date**

Debbie Florence waged a successful campaign to implement "Jenny's Law" in Connecticut after her 24-year-old daughter was shot and killed outside a friend's home on New Year's Eve, just two weeks before her unborn son was due to be born. Michael Latour, the daughter's ex-boyfriend, was charged in her death. Florence's daughter had told police a few months earlier that she was afraid Latour would kill her. The law allows Connecticut prosecutors to bring additional charges when an attack on a pregnant woman results in the death of her unborn child.

| Her boyfriend didn't want to pay child support.

- **Husband Charged with Strangling Pregnant Wife in Connecticut**

Carolos Claudio of Connecticut was charged with strangling his 31-year-old wife to death when she was seven months pregnant. Her body was found on the floor of her home by a relative.

- **Man Murders Pregnant Wife; Not Charged in Nine-Month-Old Unborn Child's Death**

In Maine, Roscoe B. Sargent was convicted for murdering his pregnant wife, whom he stabbed at least 47 times. Sargent was not charged in the death of the couple's 9-month-old unborn son.

- **Man Kills Pregnant Girlfriend, Buries Her Body in Woods**

Raymond Gregg admitted to police that he killed his pregnant girlfriend and buried her body in the woods in Morristown, TN. Gregg pleaded guilty to second-degree murder and was sentenced to 25 years in prison without parole. Prosecutors were unable to charge him with the baby's death because they could not prove the unborn child was viable, as required by Tennessee law.

- **Man Throws Pregnant Ex-Girlfriend Off Bridge onto Interstate**

Ronnie Thomas pleaded guilty to murder after throwing his pregnant ex-girlfriend off an overpass onto the interstate near Crown Point, IN. According to police, Ronnie Thomas beat the woman with a steering wheel security lock after learning she was pregnant by another man, then drove to the overpass, dragged her from the car, and threw her off the bridge into oncoming traffic.

- **Pregnant Woman Shot to Death By Boyfriend; Baby Boy Dies After Delivery**

Robert Darrell Johnson of Indianapolis was sentenced to two 55-year-prison terms for killing his girlfriend, who was nine months pregnant. Prosecutors said that Johnson beat his girlfriend, then shot her after she fell to the floor. Her unborn son died the next day after being delivered by caesarean.

- **Police: Man Charged in Slaying of Pregnant Ex-Girlfriend Had Previously Forced Her to Abort**

Tyrone Raynard Gladden of North Carolina and two other men were charged in the shooting death of Gladden's girlfriend, who was eight-and-a-half months pregnant. Doctors delivered an unborn baby girl who died a month later. According to police records, several people said that Gladden had tried to hire a hit man to kill his girlfriend. One witness told police that Gladden had previously forced his girlfriend to have three abortions and that he tried to get her to abort again.

- **Brooklyn Man Arrested for Strangling Pregnant Girlfriend After She Refused to Abort**

The body of a pregnant 20-year-old college junior was found in Manhattan by a homeless man a few days after she disappeared. An autopsy showed that she had suffocated to death, probably from strangulation. Her boyfriend, Emmanuel

Pierre, 26, was charged with her death. Police said they believed Pierre killed her because she refused to have an abortion. The woman's mother said that she had been planning to care for her grandchild while her daughter finished her education.

For More Examples

These are only a sampling of the pressures faced by girls and women whose unplanned pregnancies inconvenience others. Refer to these web sites for current news, information and more examples of coerced abortion, and pregnancy- and abortion-related violence:

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| theunchoice.com



Portraits of Coercion

"I don't know why they call it a choice."



Every Tuesday a bus took students to Planned Parenthood.

**I was only 14.
School counselors arranged it.**

Every Tuesday a scheduled bus picked up students and took them to the Planned Parenthood clinic. School counselors arranged the visits. It was all so organized ... Still today, I feel like I did not decide to have the abortion ... I was only 14 ... The nurse said this was not the time to be asking questions, that I should have asked them sooner.

Gaylene, survivor of two post-abortion suicide attempts

He was furious and insisted the child be aborted.

When I told him, he was furious and insisted that the child be aborted as soon as possible ... I did not want to kill this baby, but my co-dependence and addiction to this man won out. I finally made an appointment with the abortion clinic.

Cynthia Greenwood

The counselor played on my fears.

She told us it would be very difficult for us to have a baby. She said she had three kids herself and the financial aspect was difficult for her. She never gave me alternatives or asked if I wanted to keep the baby; she just kept playing on my fears and making me believe that it would never work out.

Kelly

Everything in me was yelling, "No! No! No!"

Everything within me was yelling, "No! No! No!" But they all advised strongly against my having the child. So I allowed them to control the situation ... Inside, my voice was screaming, "Please do not do this!"

Lee

They all looked down on me for being pregnant.

There I was alone, having an abortion. I was really low ... I didn't want an abortion ... But all the people at the abortion clinic were real helpful and friendly and tried to make you feel like you were doing the right thing. Nobody else in my life had tried to help me ... Everybody else would just look down their noses at me for being pregnant.

Cathe Birtwell

**I screamed that I didn't want the abortion.
The doctor said, "Shut up and quit that yelling."**

I was a victim of incest at 15 ... In spite of the pain and guilt I felt, it was far better to have a baby than the alternative—to kill it. I refused to have an abortion ... My father flew into an uncontrollable rage and demanded that I consent to the abortion ... [The doctor] asked three nurses to hold me while he strapped me to the bed ... I continued to scream that I didn't want an abortion. He told me, "Shut up and quit that yelling!" ... I was violated by my father ... I was violated again by the abortionist.

Denise*

**He destroyed our apartment.
"Get rid of it. Now!"**

He destroyed our apartment ... and told me to get rid of it. Now! The whole time he cornered me ... throwing things and killing me with his words. The abortion ripped me apart. Any strength I had to leave the abuse was torn away from me.

Mary

**My mother arranged my abortion.
Our pastor had assured her that it was fine.**

My mother arranged my abortion. She didn't like my boyfriend and wanted to protect my "reputation" ... Our pastor had assured her that having an abortion was fine. No one helped me ...

Jane Crawford

My parents locked me in the house for two weeks.

My parents told me I was to get an abortion. They locked me in the house and took the phone off the hook for two weeks. They told me not to tell anyone I was pregnant ... Two weeks later they took me 240 miles to Spokane for the abortion ...

Julie Woodley

My husband said he'd leave if I didn't abort.

[My husband] told me, "Either you have an abortion, or I'll leave you."

Sandra Morean

My mom said that I must abort.

I told my boyfriend I was pregnant and he acted as if he were happy. He left town a short time after that leaving me to face the pressure of what to do. My mother figured out that I was pregnant ... and she told me I must abort. She said my life would be ruined if I stayed pregnant. She also sent me to Planned Parenthood [and two counselors] ... who all agreed with my mother and counseled me to abort. I had no one who said that I could give life to my child ...

Carla Matrisch

The doctor begged me to abort.

[The doctor said that the medication I'd been taking] causes birth defects. He was very concerned about my decision not to have an abortion and literally pleaded with me ... "Please reconsider ... There are so many dangers. You're a fool to think of not aborting." [I've suspected he was afraid I'd sue him if the baby had birth defects] ... My decision came from a seed the doctor had planted ... that I should have that abortion. He was so serious that it frightened me.

Deborah Hulebak

Just to get them off my back . . .

I finally told everyone that I would have the abortion just to get them off my back.

Anonymous, survivor of post-abortion suicide attempt

I sped away—my mother caught up with me.

When I told my mom I was pregnant, she immediately made the appointment [for an abortion]. I kept hanging the phone up on her and she kept re-dialing. Finally she got through ... The next morning, I crept downstairs, got into my car and sped away—she quickly followed and finally caught up with me.

Laura O'Brien

His family pushed for abortion.

His family pushed for abortion—because I was in their home and they were having to help care for my children while I was bedridden ... I felt obligated, totally helpless. A part of me died that day.

Lori Rachuleta

After making us feel like dirt, she reassured us Medicaid would pay for the abortion.

Since [my husband] was unable to find another job, we had to go on welfare ... When our caseworker found out I was pregnant with a third child, she was just disgusted with us. She urged us to have an abortion, saying, "You just can't go around having babies all the rest of your life." After making us feel like dirt, she reassured us that Medicaid would pay for the abortion.

From that point on, there was pressure from everyone around me to have the abortion. The only one that didn't want me to do it was my mother-in-law who was herself a survivor of a failed abortion attempt. Confusion mounted, tension and pressure took control, and I became another victim of "free choice."

Lorijo Nerad

I wanted to keep my child but I had no say.

My mother took me to [the clinic] ... They told her ... abortion was the best decision. Everyone made the decision for me. I really wanted to keep my child even at that age. At that time, parents made the decision for a minor. I really had no say.

Tambra Plummer

My relatives made the arrangements.

The baby's father retracted his marriage proposal as soon as he found out I was pregnant. I had no money, no medical insurance, and didn't realize that there were places to turn to for help ... My relatives [made] all the arrangements ... Everyone was there to give advice before the abortion, but afterwards I was on my own. If I had had love, support, and above all, the true facts, I would have never even considered an abortion. The pain never goes away.

Carolyn Walton

It wasn't *my* choice. It should be called "Your Parents' and the Guy's Choice."

No one would support me ... The worst day of my life got closer and closer ... I think in more cases than not, it isn't the woman's choice. It should be called "Your Parents' and the Guy's Choice ..." I needed someone to tell me that it was possible to keep my baby, but no one did ...

Amanda

*name has been changed

Citations

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HB 2076- Women's Right to Know & See

FREE maternal counseling and pregnancy assistance is available throughout Kansas from at least 76 locations. (list available upon request)

Currently, these 14 sites, in 11 different cities, offer **ultrasounds at no charge.**

A Better Choice	3007 E Central	Wichita	KS	67214	(316) 685-5757	(316) 685-5757
ABC Pregnancy Care Center	509 N. 6th Street	Garden City	KS	67846	(620) 275-1777	
Advice & Aid Pregnancy Center	11031 W. 75th Terrace	Shawnee	KS	66214	(913) 962-0200	
Caring Pregnancy Options	2041 SW McAlister	Topeka	KS	66604	(785) 272-3316	
Choices Medical Clinic	538 S. Bleckley	Wichita	KS	67218	(316) 687-2792	(800) 879-7451
Family Life Services	305 S. Summit	Arkansas City	KS	67005	(620) 442-1688	(800) 922-7874
Hope Renewed	1040 N. West Street	Wichita	KS	67203	(316) 945-9400	(316) 524-7141
Life Care Center for Women	225 S. Walnut, Suite 102	Ottawa	KS	66067	(785) 242-4500	
Open Door Pregnancy Care Center	24 W. 4th Avenue	Hutchinson	KS	67501	(620) 728-2229	(620) 728-1540
Pregnancy Care Center	1 Riverfront Plaza, Suite 100	Lawrence	KS	66044	(785) 842-6499	
Pregnancy Crisis Center of Wichita, Inc.	1040 N. West Street	Wichita	KS	67203	(316) 945-9400	(800) 395-4957
Pregnancy Service Center	104 W. Elm	Salina	KS	67401	(785) 823-1484	(866) 970-6670
Vie Medical	613 N. Broadway, Suite C	Pittsburg	KS	66762	(620) 235-0605	(866) 443-0843
Wyandotte Pregnancy Clinic	3021 N. 54th	Kansas City	KS	66104	(913) 287-8287	



ABORTION CLINICS statewide

The annual abortion statistical report from the Kansas Department of Health and Environment does not include the locations or physicians providing abortion in Kansas. However, the **Kansas legislative research department has confirmed the following locations offering surgical and non-surgical abortions in Kansas and all use ultrasound equipment for patients.**

Clinic web pages reveal the names only of these 9 abortionists. Other information was collected by KFL from public documents.

▶ Central Family Medicine / Aid for Women, 720 Central, Kansas City, 913-321-3343,
www.aidforwomen.com
 Ronald Yeomans, M.D.KS.License # 04-14015, Ob/gyn (also practicing in West Virginia)

▶ Center for Women's Health, 4840 College Blvd. Overland Park, 913-491-6878,
<http://www.hodesnauser.com>
 Herbert C. Hodes, KS license # 04-14447, Ob/gyn
 Traci L Nauser KS license # 04-26188, Ob/gyn

▶ Comprehensive Health /Planned Parenthood of Mid-Missouri-Kansas, 4401 W 109th Overland Park, 913-345-1400; www.ppkmm.org
 Orrin A. Moore M.D. KS license # 04-19844, Ob/gyn (also practicing in Missouri)
 Michael D. Bates M.D. KS license # 04-16273, Ob/gyn

▶ Women's Health Care Services, Inc., 5101 E Kellogg, Wichita, 316-684-5108 www.drtiller.com
[George R. Tiller, KS license # 04-14025, family practice](http://www.drtiller.com)
 LeRoy H. Carhart, KS license # 04-24866, surgeon (resides and practices in Nebraska)
 Susan C. Robinson, KS license # 04-30388, Ob/gyn (resides in California)
 Shelley Sella, KS license # 04-29603, Ob/gyn (resides and actively licensed in California)

Only non-surgical ('chemical' or 'medical') abortions take place at this clinic:

▶ Planned Parenthood of Mid-Missouri-Kansas 2108 W. 27th Street, Suite J Lawrence, KS 66046, 785-832-0281, Orrin A. Moore M.D. (see above)

MANDATORY BOOKLET PROVISION

All abortion-seekers are required under K.S.A. 65-6709 to have obtained written information provided by the state in the form of **two publications**; one on fetal development and pregnancy health consequences, the other on entities providing medical and social services.

Although the law intended that the physical booklet be reviewed by the patient and discussed with the physician, abortionists merely require the pregnant woman or minor to sign a form stating that she has "received" the materials, by bringing a dated copy of materials downloaded via computer.

Overland Park's Planned Parenthood's online "duplication" of the state's mandatory informed consent booklet **omits the opening page, including the warning about coercion.** See <http://www.comprehensivehealth.org/infoBooklet.asp>

All 4 surgical abortion clinics' websites offer personalized medical **consent forms online for patients to fill out prior to any clinic interview or physical exam.**

Aid for Women's online script about informed consent uses **derogatory information** about the content and burdensome delivery of the state mandated materials, as well as sarcastic and non-clinical advice to minors. See <http://www.aidforwomen.com/24hr.php> and <http://www.aidforwomen.com/afw.htm>
<http://www.aidforwomen.com/minor.htm>

**KANSAS ABORTIONS
GESTATIONAL AGE ***

	< 9 WEEKS	9 TO 12	13 TO 16	17 TO 21	22 AND UP	NOT STATED
1998	6,795	2,832	847	547	586	17
1999	7,444	2,998	841	564	574	0
2000	7,226	3,059	854	525	639	20
2001	7,301	3,152	819	477	635	20
2002	7,027	2,927	863	447	564	16
2003	7,077	2,806	854	455	491	14
2004	6,910	2,638	850	511	518	0
2005	6,580	2,403	762	372	414	11
2006	7,078	2,533	820	393	380	17
2007	6,836	2,422	851	426	293	8
Totals	70,274	27,770	8,361	4,717	5,094	123

*Data provided by Kansas Department of Health and Environment, KS Abortions Preliminary Report, 2007.
10-year compilation done by Kansans for Life: 800-928-LIFE or 913-642-LIFE or 800-928-LIFE.

**KANSAS ABORTIONS
METHOD OF ABORTION ***

	SURGICAL OR INDUCTION						CHEMICAL		
	Suction	Sharp cur.	D&E	Prosta-glandin	Digoxin Induction	Partial-birth	RU486 (Ch. #1)	Methotrexate (Ch. #2)	All Chem. Ab.
1998	9,837	22	1,114	3	459	58	0	125	125
1999	10,650	2	929	3	366	182	0	289	289
2000	10,432	6	852	1	628	0	1	403	404
2001	10,421	1	875	3	603	0	187	314	501
2002	9,435	9	892	0	528	0	667	310	977
2003	9,320	11	933	1	464	0	689	276	965
2004	9,082	9	930	3	502	0	664	234	898
2005	8,410	11	735	4	415	0	918	48	966
2006	8,846	6	813	1	372	0	1,180	1	1,181
2007	7,897	5	853	1	283	0	1,795	2	1,797
Totals	94,330	82	8,926	20	4,620	240	6,101	2,002	8,103

*Data provided by Kansas Department of Health and Environment, KS Abortions Preliminary Report, 2007. 10-year compilation done by Kansans for Life: 800-928-LIFE or 913-642-LIFE or 800-928-LIFE.

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Attachment 11

**STATEMENT OF SCIENTISTS, MEDICAL AND
MENTAL HEALTH PROFESSIONALS ABOUT ABORTION'S EFFECT ON WOMEN**

The United States Supreme Court stated in *Gonzales v. Carhart* that "it is unexceptionable that some women will come to regret their choice to abort the infant life they once created and sustained ... severe depression and loss of esteem can follow." Abortion is a difficult and complex decision, because it has deep impact upon the woman, her own mental health and well-being, her physical health and well-being, her relationship with the child in utero, her relationship with her husband and/or relationship with her sexual partner, other family members, as well as society as a whole.

As a scientist, medical professional or mental health professional, I agree with the following conclusions about abortion:

THE FACTS

- 1) It is common for women to experience feelings of anger, fear, sadness, anxiety, grief, or guilt after abortion. The United States Supreme Court is correct that "some women come to regret their choice to abort the infant life they once created and sustained... Severe depression and loss of esteem can follow."¹
- 2) Women's reaction to these feelings vary considerably with their emotional coping abilities and pre-existing functioning. It is undeniable that significant numbers of women are injured by abortion and should not be ignored by the medical profession and that significant numbers of women suffer serious physical, mental or psychological trauma as a result of abortion.
- 3) The conclusion that there is a causal connection between abortion and negative problems is supported by three independent lines of evidence: (a) the self-attribution of women themselves, (b) mental health professionals who have successfully diagnosed and treated post-abortion reactions, and (c) statistically validated studies controlling for a large number of confounding factors which have been published in peer reviewed journals.
- 4) There is a significant body of research which demonstrates that abortion has harmful consequences for women. There is definite scientific evidence that supports this claim. The best scientific evidence to date suggests that a significant number of women who elect to abort suffer serious and enduring symptoms of anxiety, depression, trauma, suicidal behaviors, sleep disorders, and substance abuse disorders. This evidence must not be suppressed for any reason and should be provided to women as part of the abortion informed consent process. Peer reviewed research has shown that abortion is statistically associated with adverse mental health outcomes compared to women who have not elected abortion.

SIGNED BY:

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Marcus W. Allen, Licensed Mental Health Counselor, Licensed Marriage & Family
Therapist, Certified Clinical Mental Health Counselor
Dr. Daniel Amen, Medical Doctor
Constance Austin, Licensed Professional Counselor
Elizabeth Barnett, Licensed Associate Counselor**

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Attachment 12

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Jessica Campbell, Licensed Professional Clinical Counselor
Sharon Carl, Licensed Clinical Social Worker
Kay Lyn Carlson, Licensed Master Social Worker
Susan Cerni, Licensed Mental Health Counselor
Billie N. Coey, Licensed Professional Clinical Counselor, Licensed Marriage & Family Therapist, Licensed Master of Social Work
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Larry S. Thornburg, Professional Master of Science

Footnotes

- 1 Opinion of United States Supreme Court in *Gonzalez v. Carhart*, upholding the federal ban on partial birth abortion, citing The Justice Foundation Amicus Brief on behalf of Sandra Cano (the "Doe") of *Doe v. Bolton* which created the abortion "health exception" and 180 Women Hurt By Abortion.
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PROPONENT, WOMEN'S RIGHT TO KNOW & SEE, HB 2076

Barb Gosa – Executive Director
Advice and Aid Pregnancy Centers, Inc. (aapc)
11031 W. 75th Street – Shawnee - 66214
Johnson County – Kansas

Background:

- Executive Director at **aapc** since February 2004, served on **aapc** board since 2002, volunteered since 1998.
- July 1983 through January 2004 – Deluxe Check Printers, held various management positions; project manager for 1-3 million dollar projects, process improvement consultant, eCare internet operations manager, and issue management specialist.
- Peer counseling to post-abortive women since 1992.

Experience related to HB2076:

I was trained in 1992 as a peer counselor to help women who were having emotional or spiritual issues due to a past abortion decision. I have continued to educate myself in that area and teach others since that time. I was drawn to this type of volunteer work after someone reached out to me and helped me get over issues in my life related to an abortion decision I had made in my teen years. **In the past seventeen years I have met with and counseled dozens of post-abortive women (70+).** Each story has been unique and at the same time each woman has expressed the same issues or pain. Common themes I've heard over the years:

- "I wish they <abortion clinic> would have given me more information."
- "No one told me it was a baby."
- "I was pregnant again in just a few months. I thought that would help with the pain but it didn't."
- "My _____ <parent, husband, boyfriend> told me I had to have the abortion."
- "I didn't see my abortion as one of three choices. I saw it as my ONLY choice."

And the list could go on. Back in 1975 when I had my abortion, three times I asked "Is this a baby?", and three times I was told "No, it is just tissue." Years later when I was pregnant with my son, a friend gave me a book on fetal development. **When I saw the picture of an eight week fetus I was shocked by the truth.** Some might feel that it is different now and that clinics don't withhold information to women who ask for it. Well, based on my experience I must share with you that not much has changed. Women are not being given all the information they need prior to making a decision of this magnitude. Even now, in 2009.

Just a few months ago a women came to **aapc**. I saw her as she came in the front door. She was crying before she even gave me her name. The day before she had been at an abortion clinic in Overland Park, KS where she had gone to have an abortion. She chose RU486 – medical abortion. She described her experience to me. She remembered being very frightened and unable to stop crying. She was overwhelmed by how crowded it was and by how many women were in there waiting for their appointments. In the waiting room she was given the **opportunity to ask questions and even though she was uncomfortable asking in the group** her first question was "My church teaches abortion is murder. Is that true?" The clinic personnel laughed and explained that her church was "silly and old fashioned". She was humiliated. Later when she was in a smaller group she asked, **"Is this a baby?" and their response was, "No, it is merely an embryo."** This young woman had never heard the word "embryo" and there was no explanation beyond that. A few hours after taking the first meds she changed her mind. She tried to call the clinic to find out what can be done and they **refused to allow her to come back to the clinic to talk with someone.** They

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Attachment 13

just said "continue with the other meds as you were directed" and hung up the phone. Now a day later, less than 24 hours after starting the procedure, she is in our center begging for anyone to help her. She holds her hands over her belly and while she cries she keeps saying "I think my baby is already dead. I don't think I can go on living, I wish I was the one who was dead."

Had this young woman in her twenties been given full and complete information that she could understand would she have made a different choice? We'll never know. Did she deserve to have all that information prior to her abortion? YES.

Frankly I'm angered that in America, in Kansas, it requires a bill like HB2076 to be passed in order to see that women get all the information they need before having an abortion. I am of the opinion that women are intelligent human beings, capable of making intelligent decisions, when they are given intelligent and complete information.

aapc started in 1983 and began offering on-site sonograms and nurse consultations to clients in December of 2004. We have 6-8 physicians available to consult with our clients when needed and all our medical services are provided under the direction and supervision of a KS physician board certified in OB/GYN, who has eighteen years of experience. **Since that time we have provided over 725 sonograms and have seen 80% percent** of the women we gave ultrasounds to decide to continue their pregnancies. To our knowledge none of them have regretted that decision; even when their circumstances have been difficult. Many of them continue to get **support through our center until that child turns three years old**. Of the 20% that decide to abort after they have been given full and complete information we see some come back to us pregnant again, less than a year after their abortion. We also have **some call us in tears because they regret the decision they made to abort. They are invited back to speak with a peer counselor and offered continued love and support if they need it**. The women I've worked with in that situation all have said they tried to get that type of help from the abortion clinic they went to but they were told to just "go away" (their words, not mine).

In closing, while this bill is being debated on many levels from those that are strongly for or against abortion, I would just like to appeal to the common sensibility of it. **If I had a mammogram and was told there was a "lump"; I would be given so much information and education on what that means and what my choices of treatment are that my head would probably hurt** and I'd be overwhelmed. Does that mean I don't want the information or deserve to have it? NO. Does that mean I would be too emotional to handle the information in a manner that is best for me? NO. Is there an expectation that I couldn't handle it or am not smart enough to deal with it? Typically not. So why withhold vital information from a woman considering abortion? Why not fully inform her of exactly what she is about to abort and all the potential risks involved? Why not fully educate her on all three "treatment" options for her pregnancy; adoption, abortion, and parenting? Why can't we assume she is an intelligent human being who is capable of making an intelligent decision when she is given intelligent and complete information? Based on **what I've seen and heard in the past seventeen years I am more convinced than ever that women will typically make the decision that is best for them when they have all the information they need to make that decision**.

So what is the risk? More women might decide to continue their pregnancies. For some that will mean they need to have support beyond the birth of the child. Agencies, like **aapc** might find they have to grow and expand their support services. We are here and ready. There are pregnancy centers all over the state of Kansas that are equipped and ready too. **I urge you to pass HB 2076**. Thank you.

Remarks by Cheryl Sullenger to the House Federal and State Committee Hearing In Support of HB 2075 – The Woman’s Right to Know and See Act

February 11, 2009, 1:30 PM

Contact information:

Cheryl Sullenger, P.O. Box 781045, Wichita, KS, 67278; Voice: 316-516-3034; Fax: 316-634-1045

My name is Cheryl Sullenger. I am here in my capacity as a private citizen, but in my professional capacity I am the senior policy advisor for Operation Rescue. I stand in support of HB 2075, The Woman’s Right to Know and See Act.

I have been involved in the pro-life movement in various capacities for 25 years. Much of that time has been spent working with abortion minded women in crisis pregnancies. I have personally been involved seeing over abortion bound women 2,500 women change their minds about abortion and make decisions to keep their babies or release them for adoption.

Over the years, I began to realize that the abortion clinics where I met these women were engaged in questionable practices, that placed the health and sometimes the lives of women in jeopardy. I began to conduct research on abortionists in Southern California, particularly the San Diego area, and discovered numerous violations of the laws. We began to report these incidents to the authorities in order to protect women from the abuses we uncovered.

My work has followed a national trend to document and expose wrong-doing at abortion clinics. Perhaps you have heard of Lila Rose, a UCLA student that has made headlines recording staff members at Planned Parenthood offices across the country who have counseled girls how to cover up incidents of child sex abuse. Her work has prompted the Attorney General of Indiana to launch an investigation into his state’s abortion clinics.

Our own investigations have uncovered and documented illegal activity in states like California, Florida, Michigan, Massachusetts, and of course, Kansas. One woman in California, who we worked to expose for many years, was recently sentenced in Los Angeles to over 3 years in prison for doing abortions without a medical license, and is set to be sentenced in San Diego later this month on 9 felonies. Another California abortionist, a convicted sex offender, who used his abortion office as a means of accessing his victims, lost his license to practice medicine, and was arrested several months later when it was discovered he continued his abortion practice illegally. An abortionist in Massachusetts that killed Laura Hope Smith during a botched abortion lost his medical license and now faces criminal charges. In Florida, just last week, an abortionist we had been working to expose for over two years had his medical license revoked in a horrific case where a baby was born alive during a botched abortion, then shoved into a plastic bag and stashed on the roof of the clinic. We continue to work with law enforcement in that community to bring charges against those who are responsible for killing that baby. We are currently working with law enforcement in other states behind the scenes to protect women from other incompetent and dangerous abortionists.

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Whether one is pro-life or pro-choice, we can all agree that women deserve to be protected from exploitation and harm from shoddy care and illegal practices like the ones just mention. Our work in exposing activity like this inside the abortion industry has served the public interest in doing just that.

Recently in Kansas, information we have come across led us to believe that a woman's rights to ACCURATE informed consent are being violated. Because of this, we initiated an undercover investigation of late-term abortions at George Tiller's Women's Health Care Services, in Wichita, Kansas, focusing on the determination of fetal age and viability. We discovered compelling evidence that WHCS intentionally underestimates fetal age, and therefore viability, in order to avoid compliance with the Kansas ban on post-viability abortions.

Background

I interviewed several former Tiller patients concerning the determination of fetal age and viability, and had reason to believe that Tiller's employees routinely underestimated the gestational age of pregnancies, and/or determined that viable pregnancies were non-viable for no reason other than to avoid having to obtain the concurring opinion from a second Kansas physician that the late-abortion met the strict exceptions allowed in K.S.A. 65-6703.

That law states in part:

No person shall perform or induce an abortion when the fetus is viable unless such person is a physician and has a documented referral from another physician not legally or financially affiliated with the physician performing or inducing the abortion and both physicians determine that: (1) The abortion is necessary to preserve the life of the pregnant woman; or (2) a continuation of the pregnancy will cause a substantial and irreversible impairment of a major bodily function of the pregnant woman.

If the physician determines the gestational age of the fetus is 22 or more weeks, prior to performing an abortion upon the woman the physician shall determine if the fetus is viable.

Viability is defined by law as when a baby can survive for an indefinite period outside the womb with natural or artificial life-supportive measures. Babies have been known to survive at 22 weeks and earlier, although 23 weeks is generally considered the threshold of viability in the United States, where there exists superior neonatal technology. At 24 weeks, the viability of healthy babies born to healthy mothers is undeniable in the medical community worldwide. Kansas law implies that each case be individually reviewed and tested for viability beginning at 22 weeks gestation.

Mental health risks are interpreted to be included in K.S.A. 65-6703 as a "major bodily function" as long as the condition is both **substantial and irreversible**.

Examples of violations surface

Most notable among those interviewed were Michelle Armesto and a botched abortion victim referred to as "Patient S."

Mrs. Armesto, (maiden name Berge), came forward in 2007, and testified before a joint legislative committee that she was given an abortion at WHCS against her will on May 13, 2003, in her **24th week of pregnancy**. She and her mother arrived late for her abortion appointment and she missed the time when the other late-term abortion patients saw the second physician. Mrs. Armesto discovered only after receiving her medical records years later that abortionist Shelley Sella had made a determination that her baby was non-viable. Mrs. Armesto testified that she was in good health with an uncomplicated pregnancy and had no reason to believe that her baby was not viable.

Patient S. had an abortion at WHCS in September, 2008. She told me that she was **23 weeks** pregnant at the time of the abortion, but WHCS staff members told her that she was only **19 weeks**. She said she knew that was wrong, but did not say anything fearing the price of the abortion would go up if she did. Patient S. received no concurring signature from a second Kansas physician before her abortion that ended in life-threatening complications and an emergency hospitalization.

The investigation begins

A pregnant volunteer, Shaye Stewart, offered to make an appointment for and procure a sonogram at Women's Health Care Services.

Shaye could not be with us today because she gave birth to a healthy baby boy just last Friday by Caesarean Section, and is recovering and caring for her newborn son.

Shaye had been under the care of a physician prior to the investigation. She and her pregnancy were found to be healthy and progressing normally, without complications.

Gestational age is often determined using the first day of a woman's last menstrual period (LMP). For Shaye, that date was April 18, 2008. According to that date, Shaye would have been 25 weeks 5 days along, well past the 22 weeks when viability must be determined under Kansas law.

The undercover aspect of this investigation was conducted on October 16-17, 2008. All telephone calls made to WHCS were taped.

Misleading information from WHCS employee

On October 16, Shaye placed a phone call to WHCS in an attempt to schedule an abortion. She spoke with Tiller employee Diane Warren, who erroneously told her that up to the 24th week of pregnancy, Kansas law says abortion is a woman's choice.

Warren seemed confused about exactly how to calculate Shaye's pregnancy using her LMP and first told Shaye that she was between 31 and 32 weeks of pregnancy. When Shaye told her she could not be that far along, Warren told Shaye to procure a sonogram and bring her the BPD number so that they could determine whether they would do the abortion and how they would set her fee.

The BPD number is the Biparietal Diameter, or the measurement across the baby's head that can be used to determine fetal age.

Shaye was given an appointment for a sonogram the next day, on October 17, 2008.

Sonogram Measurement Trashed

The following is an excerpt from a sworn statement made by Shaye concerning her experience at WHCS that day.

The woman who gave me the ultrasound at WHCS was Lindsey Alejandro. She informed me that my baby was 24 weeks, 6 days gestation. I told her that I did not think I could be that far along, so she told me she was going to try something else.

At that point, Ms. Alejandro tore off the ultrasound photo that showed 24 weeks, 6 days gestation and threw it into a trashcan. She remeasured the baby from another angle and the measurements came up as 23 weeks gestation.

Ms. Alejandro told me that I could have the abortion because it is a woman's choice up until 24 weeks.

Shaye was not allowed to view her sonogram. When she tried, Ms. Alejandro pulled the screen away. The audio feature of the ultrasound machine that emits the fetal heart tones was turned off.

Shaye was directed to another WHCS employee, Deborah Esquina, and given an appointment for an abortion at WHCS for the following week with abortionist LeRoy Carhart, and told her abortion would cost \$3500 – up front – plus \$65 for medication. She was instructed to return on Monday, October 20, for her final consultation, and was told the actual abortion would begin on Tuesday, October 21, 2008. She received **no** appointment with a second Kansas physician for the purpose of concurring on the medical necessity of Shaye's pregnancy, even though she would have been **24 weeks, 3 days at the time of the abortion** according to WHCS's own second and lower determination of fetal age. This was past the medically accepted threshold of viability.

WHCS employee Linda Joslin took Shaye's medical history and was aware that she and her pregnancy were healthy and without physical or mental health complications. WHCS was specifically aware that Shaye did not suffer from depression.

Two more sonograms confirm later gestational age

In order to confirm the actual gestational age of Shaye's baby, she received a second sonogram on October 17, 2008, at **Via Christi-St. Joseph's Hospital** in Wichita. According to that hospital's measurements, Shaye's pregnancy was **24 weeks 3 days**. This would have placed the gestational age of Shaye's baby at 25 completed weeks on the day the abortion was scheduled to begin.

As an extra confirmation, Shaye received a third sonogram on October 17, 2008, from **Baby Waves** in Wichita, which determined that Shaye's pregnancy was **24 weeks, 4 days**. This would have placed the gestational age of her baby at 25 weeks, 1 day, on the day the abortion was to begin. *[Refer to chart]*

According to **four independent determinations**, including Shaye’s LMP, the first (and discarded) WHCS measurement, and sonograms from Via Christi Hospital and Baby Waves, Shaye’s baby was past the most liberal threshold of viability.

The **only measurement** that actually placed the gestational age of Shaye’s baby under 24 weeks, when there could still be some question as to viability, was the **second ultrasound measurement** taken **after** Tiller employee Lindsey Alejandro tore off and **threw in the trashcan** measurements that showed Shaye’s baby was clearly **past the threshold of viability**. That was the measurement used to schedule an abortion for Shaye’s baby.

Determinations of Gestational Age of Shaye’s Baby		
Determiner	Age on Oct. 17, 2008 (Sonogram day)	Age on Oct. 21, 2008 (Scheduled abortion day)
LMP	25 weeks, 5 days	26 weeks, 2 days
WHCS (1st)	24 weeks, 6 days	25 weeks, 3 days
WHCS (2nd)	23 weeks, 6 days	24 weeks, 3 days
Via Christi	24 weeks, 3 days	Exactly 25 weeks
Baby Waves	24 weeks, 4 days	25 weeks, 1 day
Kansas law states that a determination of viability must be made at 22 weeks gestation, when viability is possible. The commonly accepted threshold of viability is 23-24 weeks.		

But even that measurement was **beyond the 22-week barrier** encoded in Kansas law at which time viability must be determined, and would have placed her pregnancy at 24 weeks, 3 days – beyond the most liberal threshold of viability – at the time the abortion was scheduled to begin.

Shaye later procured copies of her sonogram records from all three locations and provided them to Operation Rescue with permission to publish them.

Conclusion

Kansas law states that “no person shall perform an abortion when the fetus is viable.”

- **Health and viability:** Shaye’s baby was past the medically accepted threshold of viability according to four independent determinations. There was no condition that threatened Shaye’s health, either physically or mentally. In fact, as of this writing, Shaye is enjoying a healthy pregnancy, and is expecting a healthy baby boy in early February, 2009.
- **Misrepresentation of Kansas law:** Shaye interacted with a total of 4 WHCS employees, none of which gave her correct information about Kansas law. At least two employees of Women’s Health Care Services misinformed Shaye that before the 24th week of pregnancy, Kansas law says abortion is a woman’s choice. However, Kansas law places the limit of unrestricted abortion at 22 weeks gestation, when viability is possible and a determination of viability must be made. The 24th week of pregnancy is not even mentioned in Kansas law.
- **Intentional underestimation of fetal age:** When the first determination of fetal age did not suit them, a WHCS employee destroyed that measurement and came up with a new, earlier fetal age, and advised Shaye that she could proceed with the abortion, knowing full well that her baby was more beyond the threshold of viability.

- **Violation of second concurring physician requirement:** Shaye all too easily obtained an appointment for a post-viability abortion without being referred to or obtaining the signature of a second Kansas physician as required by law.
- **Violations of Informed Consent:** Kansas also has an informed consent law (K.S.A. 65-6709) that requires that abortionists tell women the gestation age of their babies, among other things. Women's rights to informed consent are violated when WHCS misrepresents Kansas law to women considering abortions. **This misrepresentation of the law, coupled with the intentional underestimation of fetal age and viability, forces women to make serious, life-altering decisions based on false information,** violating the purpose of the informed consent statute.

Shaye told me that it was her understanding that WHCS would have stopped at nothing to give her an abortion, even offering her a number to call for financial aid so money – a hefty \$3500 fee – would not be an issue that would prevent her from getting the abortion.

Shaye's case is not an isolated incident. When taken into consideration with interviews from other former WHCS patients, it shows a **pattern of abuse**. There is every reason to believe that the gestational age of pregnancies and viability is routinely and intentionally underestimated at Tiller's abortion clinic to avoid having to comply with Kansas law.

It is clear that WHCS coyly attempts to appear as if they are following the law, without actually doing so, even according to evidence in their own records presented here. ***WHCS employees lead women to believe that their late-term abortions are being done in compliance with the law when, in fact, the evidence shows that they are not.***

This kind of deception is placing women's lives in danger, since the risks of serious abortion complications increase as the gestational age of the baby increases. There are physical dangers to doing abortions on women whose gestational age has been miscalculated. In addition, the deception of WHCS is also needlessly costing the lives of viable babies that the law was enacted to protect.

We believe that HB 2075 will address at least some of the problems we have uncovered by giving women access to their own ultrasounds images, and helping them make determinations based on, hopefully, accurate information. Because of the protections it offers women, I urge you to pass HB 2075.

[A 9-minute video report and a full written report, including actual recordings and documents and links with additional information, is available online at <http://www.operationrescue.org/illegal-fetal-ageviability-deception-scheme-uncovered-by-operation-rescue-at-tiller%e2%80%99s-abortion-clinic/>]

Attachments to Cheryl Sullenger's Statement

1. Shaye's affidavit dated December 5, 2008, concerning her ultrasound appointment at Women's Health Care Services.
2. Receipt for sonogram from WHCS dated October 17, 2008.
3. Sonogram images from WHCS dated October 17, 2008
4. Sonogram images from Baby Waves dated October 17, 2008
5. Sonogram images from Via Christi, St. Joseph Hospital dated October 17, 2008

Statement of Shaye Stewart, taken on December 5, 2008.

I am Shaye Stewart, a resident of Sedgwick County, Kansas.

I am currently pregnant. The first day of my last menstrual period was April 18, 2008.

On October 17, 2008, I received an ultrasound at Women's Health Care Services, located at 5107 E. Kellogg in Wichita, Kansas.

The woman who gave me the ultrasound at WHCS was Lindsey Alejandro. She informed me that my baby was 24 weeks, 6 days gestation. I told her that I did not think I could be that far along, so she told me she was going to try something else.

At that point, Ms. Alejandro tore off the ultrasound photo that showed 24 weeks, 6 days gestation and threw it into a trashcan. She remeasured the baby from another angle and the measurements came up as 23 weeks gestation.

Ms. Alejandro told me that I could have the abortion because it is a woman's choice up until 24 weeks.

I was sent to another room where I filled out additional paperwork, then was sent to see Deborah Esquina, who explained pricing and other information about the abortion to me. She gave me a phone number that I could call to get financial help.

About an hour and a half later, I went to Baby Waves, located at 1861 N Rock Road, Suite 200, in Wichita, Kansas. There I received another ultrasound examination. The technician there told me my baby was 24 weeks 4 days gestation.

Later that evening, I went to Via Christi St. Joseph Medical Center, located at 3600 E. Harry Street in Wichita, Kansas, where I received a third ultrasound. The technician who examined me at Via Christi St. Joseph told me that my baby over 24 weeks gestation.

I do hereby affirm that the above statement is true and accurate to the best of my ability.

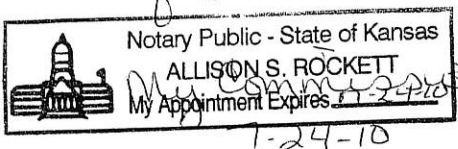
Shaye Stewart
Shaye Stewart

12-5-08
Date

State of Kansas
County of Sedgwick.

Sworn to before me this 5th day
of December, 2008, by Shaye Stewart.

Allison Rockett
Notary



House Fed & State Affairs
Date: 2-11-09

Women's Health Care Services, Inc.
RECEIPT

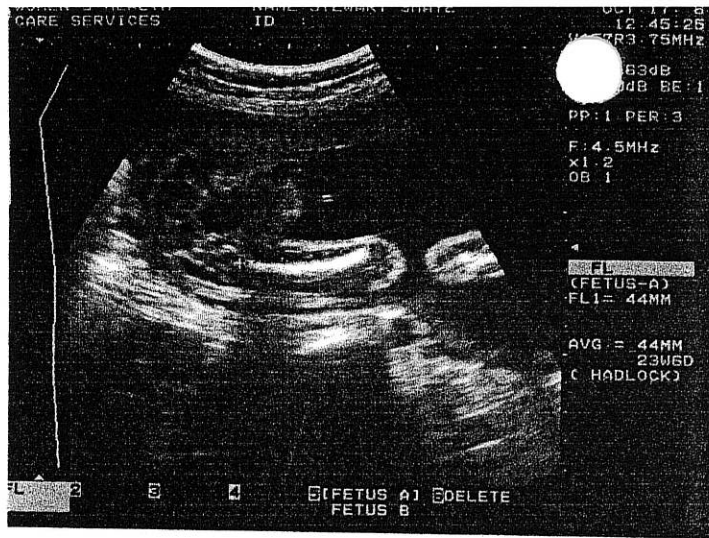
DATE	10/17/08	No.	436455
RECEIVED FROM	Shaye Stewart		\$ 100.00
			DOLLARS
<input type="checkbox"/> FOR RENT	SONO		
<input type="checkbox"/> FOR			
ACCOUNT	100	<input checked="" type="checkbox"/> CASH	FROM _____ TO _____
PAYMENT	100	<input type="checkbox"/> CHECK	BY: <i>DB</i>
BAL. DUE		<input type="checkbox"/> MONEY ORDER	

edams 1182

House Fed & State Affairs

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Attachment 16



House Fed & State Affairs

Date: 2-11-09

Attachment 17

Shaye Stewart 05131620081017 10/17/2008 Baby Waves

Shaye Stewart
 Patient ID: 05131620081017 Accession #:
 Study Date: 10/17/2008
 Institution Name: Baby Waves Insight US

OB

Obstetrics - Patient Study Info and Comments

Diabetic Type Ectopic
 G P A

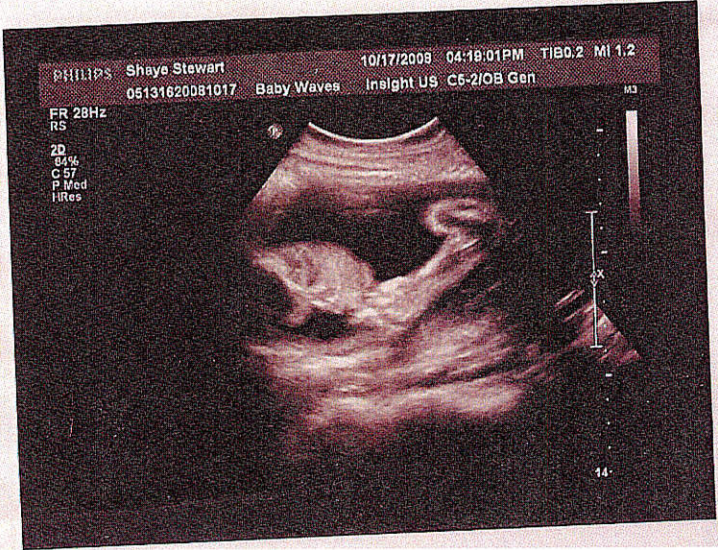
OB Summary

AUA	24w4d	HC/AC	1.05 (1.05-1.21)	EFW	Weight 714g (+/-104g)
GA(LMP)	24w3d	FL/BPD	70% (71-87%)		1lb 9oz (+/-4oz)
LMP(c)	04/29/2008	FL/AC	21% (20-24%)	Author	Hadlock (AC,FL,HC,BPD)
EDD	02/03/2009	Fetuses	1		
EDD(AUA)	02/02/2009				LMP Percentile 46% (approx. 3-97%)
					Author Hadlock

General OB

AUA 24w4d

Shaye Stewart 10/17/2008 Page 1 of 2



17-2

SJL9US2

Ex: 4104

Se: 0001/1

Im: 0009/46

Mag: 0.7x

Via Christi St. Joseph 4

STEWART SHAYE E

1976 Apr 18 F 2298104

Acc: 5735139

2008 Oct 17

Img Tm: 22:28:55

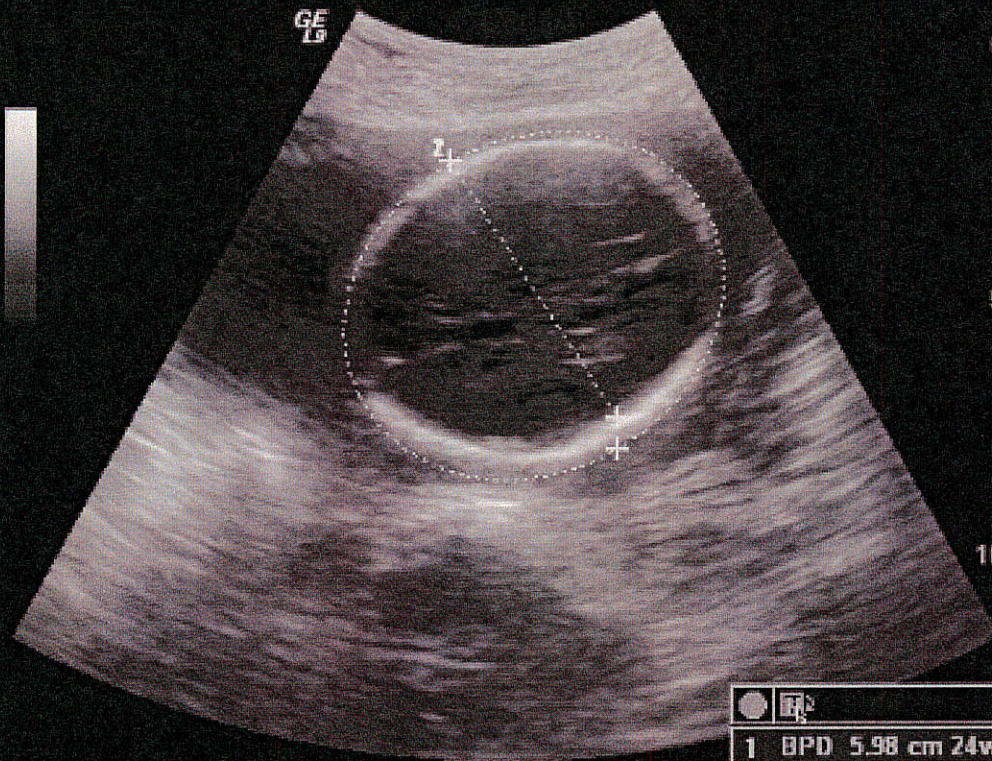


Via Christi St. Joseph 4
10/17/08 10:28:37 PM HMV

STEWART, SHAYE
2298104

MI 0.27 TIs 0.0 4C
--:--:--

OB-2/3



B

0- Frq 4.0 MHz

Gn 43

S/A 2/1

Map H/O/O

- D 14.0 cm

- DR 78

- FR 24 Hz

- AO 69 %

5-
I
I
10-

●	■	
1	BPD	5.98 cm 24w3d
2	HC	22.29 cm 24w2d
	OFD(HC)	7.67 cm

Id:DCM / Lin:DCM / Id:ID
W:256 L:127

Brenda Spurlock - Testimony in support of House Bill 2076

House Federal State Affairs Committee
Chairman Melvin Neufeld and committee members,

Feb.11, 2009

My name is Brenda Spurlock. I live north of Topeka with my husband and children. It is my firm belief that HB 2076 will better assist women and families facing dire medical diagnoses for their unborn babies. This bill will inform pregnant women about the **amazing free services available in Kansas for prenatal medical challenges.**

Nearly 15 months ago, I began writing a journal to a baby I was told I would never know, because she had a "100% fatal" chromosomal condition. We refused the abortion pushed by my physicians. It is only through God's grace, and the medical assistance at Alexandra's House, that our baby girl, Tatum, is alive and thriving.

Tatum's prenatal care was supervised by my regular Topeka obstetrician/gynecologist. Through an Alpha/FetalProtein test and level II ultrasound testing, we were advised that Tatum had a one-in-25 chance of

- ▶ **Trisomy 18**, an extra chromosome occurring in 1 in 6,000-8,000 live births,
- ▶ a large **encephalocele** (a neural tube defect that causes a protrusion from the skull),
- ▶ a brain defect called **Arnold-Chiari Malformation**,
- ▶ **chromosomal abnormalities** witnessed by flattened facial features and clenched fists,
- ▶ **hydrocephalus** (water on the brain), and
- ▶ **heart problems**, including VSD (a hole between ventricles).

A dear friend of ours had read about **Alexandra's House** in the Kansas City paper and sent me an email about them. I contacted them that very night by email and was blessed to learn that they were having a **Grief Retreat** that coming weekend. My husband and I were touched deeply by participants--mommies and daddies who had suffered immeasurable pain and were living our greatest fear...the losses of their babies.

ABORTION RECOMMENDED

When we saw our regular obstetrician at 22 weeks gestation, he **gave us the option of choosing abortion**. He also said that if we chose not to abort at that time, that we could later choose an "early induction". [Early induction is putting a woman into labor at a premature stage where the baby is unlikely to survive.] He explained to us that Tatum's anomalies were such that she was "not viable" and could not survive to term. So, according to Kansas law, all we needed was the signatures of 2 consenting physicians, saying that Tatum was not viable...and he went on to say that we needed no additional testing, as both he and the perinatologist agreed as to Tatum's outcome. But we declined, adamantly!

ALEXANDRA'S HOUSE

In November 2007, Alexandra's House connected us with a Kansas City sonographer with many years of experience, who performed a 3-D ultrasound of Tatum and spent well over an hour taking pictures, so that we would have a video and photos to remember Tatum. We told her of our prior ultrasounds and diagnoses, and **she was able to show us some positive changes.**

▶ she could not see a heart defect-so if it was there, it was so small it was imperceptible;

▶ in contrast to the prior opinion that Tatum had flattened features, we saw very defined features. We cried tears of joy!



34wks in utero TATUM

House Fed & State Affairs

Date: 2-11-09

Attachment 18

A 34 weeks amniocentesis indicated Tatum had a small marker chromosome, an unknown... it was her 18th chromosome, but no more than that could be known. Now, we dared to have a little hope.

Prior to those results, there was no acknowledgment that Tatum could survive, we were **just told again and again that what she had was fatal**, that many of her anomalies were also fatal...what they could offer us was comfort care for her as she passed. We were given **no referrals to pediatric neurosurgeons, or heart specialists**.

Only through Alexandra's House, did I get the encouragement to fight for Tatum...to contact the medical professionals who would treat her. And I did. I contacted a pediatric neurosurgeon. He ended up being Tatum's surgeon and did a beautiful job. Our baby, who was not supposed to survive, who was labeled "non viable" again and again...is now one year old. She had **3 surgeries** shortly after birth.

- ▶ one to insert a **shunt** to drain and control her hydrocephalus,
- ▶ one to **remove her encephalocele**, which ended up containing only cerebral spinal fluid and some brain cells-- but no actual matter,
- ▶ and a final **plastic surgery to repair the area** where the encephalocele had been.

Tatum does have some issues with her brain, including a very small cerebellum and small brain stem. Her neurosurgeon believes that other parts of her brain will compensate for those areas as she ages. We had further genetic testing after she was born and the **final diagnosis is Partial Trisomy 18**. Tatum's particular tripling of the 18th chromosome has never been documented or journaled, so no one knows what to expect. (Well, that is not really true, because God knows what to expect, and as our family decided very early into this journey, our job is just to love Tatum and praise God for His gift.)

CONCLUSION

In our prenatal journey with Tatum, we met and dealt with many members of the medical community who were kind, caring and genuine. That was a blessing, and we will remember their kindness always. Having said that, **kindness only goes so far** when you are in a situation like this. **There needs to be available counseling** from places like Alexandra's House, which exhibits an amazing ministry.

I fear many women are being driven to an irreversible abortion before they experience high quality sonography by a seasoned technician who can spend the time evaluating the true medical condition of the fetus. Even **my regular physicians and staff overestimated the number of dire and fatal anomalies Tatum exhibited in utero, while the Alexandra's House expert was accurate**. The regular physicians were very quick to send me for an abortion, without expert referrals, thorough sonography, information about community resources for the disabled, or any kind of grief counseling.

We are so thankful to have experienced superior diagnostic and surgical care in the Kansas City area, thanks to **Alexandra's House, which also provides**

- ▶ experts to help you design a delivery "plan,"
- ▶ mentors and coaches,
- ▶ companionship alongside you during doctor appointments,
- ▶ free pre- and post- delivery hospice,
- ▶ support groups.

I hope this committee will pass HB 2076 and help pregnant women receive the best level of medical assistance Kansas has to offer when they are facing medical challenges. Thank you,

Brenda Spurlock

227 NE 86th St, Topeka KS 66617, phone 785-484-3260

PROPONENT, WOMEN'S RIGHT TO KNOW & SEE, HB 2076
FEB. 11, 2009 HOUSE FEDERAL STATE AFFAIRS COMMITTEE

Good afternoon, Mr. Chairman and committee,

My name is Laurie Hermesch. I truly support this Women's Right to Know and See bill because of my own experience with abortion. I was **19 years old** and had been married for about 2 months. My husband and I were both unemployed and were staying with friends because we had no home. I had been feeling sick for a few months and after a visit to the health clinic was informed that I was pregnant. I couldn't believe what I was hearing when I sat in the doctors office hearing the news. When I began to cry, the nurse said to me "It looks like this is not very good news". I told her that we couldn't even feed ourselves so how could we care for a baby. She said there was a place in Kansas City that could take care of the problem. I told her I had no money and she walked me through the steps to get a medical card that could take care of the entire cost.

She also **told me that this was not a baby yet so it wouldn't be wrong** to get an abortion. She told me there was **no beating heart** yet and therefore it was not a baby. I was desperate and believed everything she was telling me. **I felt trapped**. Abortion was the only alternative presented to me and I felt it was my only choice.

I went to the Kansas City clinic and was told I had to go through counseling before they could actually do the procedure. The counselor **told me that this wasn't really a baby, but just a mass of tissue**. She assured me I was making a good decision. She then asked me if I wanted the abortion and I told her I did.

The decision to have an abortion has been one of the biggest regrets of my life. I have since learned that there WAS a baby inside me and I had denied my child the right to live. I can honestly say that if I had been given the **chance to see my baby through a sonogram, I would not have made the choice of abortion**. Looking back I realize that I was **not given all the information I needed** to make the right decision and I will regret my choice for the rest of my life. **This bill is very personal to me** because I am completely convinced that had I been able to see that the "mass of tissue" was a child with head, body, arms and legs and a beating heart, I would never have been able to choose to "take care of the problem".

There would be so many lives saved if sonograms were available prior to an abortion. Not only would the lives of many babies be saved, but the women who chose not to have those abortions would be able to **avoid all the physical complications and the emotional devastation, grief and deep regret** that follows the abortion decision. It has now been 30 years since my abortion and life has gone on, but not for my baby. I will never know what my life would look like now without the heaviness I have felt all of these years and I will never know the wonderful joy of loving my child that is no longer alive due to my choice..

Please pass this bill. Thank you.
Laurie Hermesch
2046 SW Westwood Dr.
Topeka, KS 66604

House Fed & State Affairs

Date: 2-11-09

Attachment 19

ProKanDo

~ Protecting Women's Rights at the State Level ~

11 February 2009

Chairman Neufeld
House and Federal State Affairs Committee
300 SW 10th St., Suite 161-W
Topeka, KS 66612

Dear Chairman Neufeld and Committee Members:

Thank you for allowing me to address the committee today and voice my concerns regarding HB 2076 and HB 2166. I come before you today in opposition to these two bills.

I have three specific points that I would like to make:

1. (HB 2076 works to interfere with the doctor-patient relationship.)
2. In this bill, it seems that clinics would be responsible for gathering information about free perinatal hospices before providing it to patients. When doing a search in the Kansas Yellow Pages and online for a Kansas perinatal hospice, I could only find one such hospice located in Kansas— Choices Medical Clinic. This hospice is an organization whose mission is to oppose abortion. Crisis pregnancy centers like this organization often provide politically motivated, misleading or biased information and do not serve the interests of women by giving them full options counseling about their reproductive health choices, which is contrary to the name of this organization. Women are served by being able to make the best decision for themselves and their families, including being able to access abortion free from government interference when it comes to this important life decision. (The language in this bill would require reproductive health clinics to provide free marketing services for this politically motivated crisis pregnancy center, and would not protect women.)
3. Lastly, I would like to address HB 2166, which seeks to exempt a mental health exception from abortion care. **The United States Supreme Court has long held, and other federal courts have affirmed, that a criminal (post-viability) abortion statute MUST include a mental health exception under the US constitution.** HB 2166 would go directly against this established constitutional standard.

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www.prokando.org

House Fed & State Affairs

Date: 2-11-09

Attachment 20

ProKanDo

~ *Protecting Women's Rights at the State Level* ~

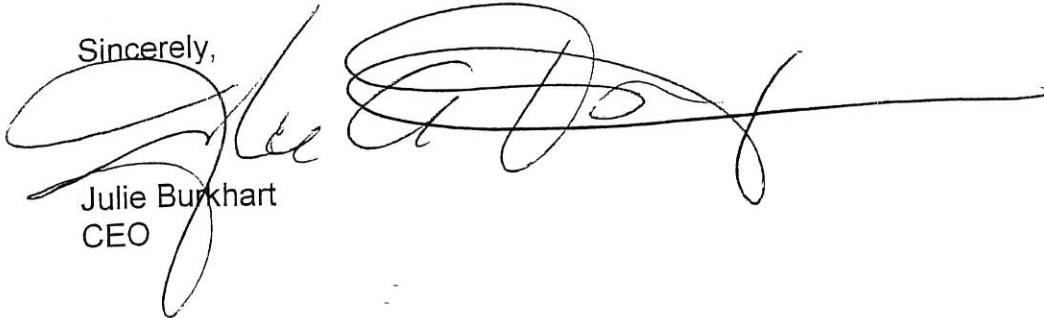
In *Doe v. Bolton*, the companion case to *Roe v. Wade*, the U.S. Supreme Court held that “[M]edical judgment may be exercised in light of all factors—physical, emotional, psychological, familial and the woman’s age—relevant to the well-being of the patient. All these factors may relate to health. This allows the attending physician the room he needs to make his best medical judgment.” *Doe v. Bolton*, 410 U.S. 179 (1973). The U.S. Supreme Court and lower courts have affirmed that statement since.

The Kansas Supreme Court has accepted and applied this standard specifically to Kansas’ post viability law. “Moreover, ‘health’ has been interpreted by the United States Supreme Court to include the mental or psychological health of the pregnant woman.... Until the United States Supreme Court or the federal Constitution says otherwise, however, the mental health of the pregnant woman remains a consideration necessary to assure the constitutionality of the Kansas criminal abortion statute.” *Alpha Medical Clinic v. Anderson*, 280 Kan. 903 (Kan. 2006).

For these reasons, I stand in opposition to the bills at hand. I urge the Committee to reflect upon the doctor-patient relationship and the implications that HB 2076 would have upon that relationship. I ask the Committee to reflect upon the precedent that has been carved into law regarding abortion care and a woman’s health and the implications that HB 2166 would have on that long standing exception.

I thank you for hearing my testimony today.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read 'Julie Burkhart', is written over the typed name and title.

Julie Burkhart
CEO

PO Box 8249
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316.691.2002 office
316.691.8267 fax
www.prokando.org

Mark Pederson, Aid For Women, Kansas City, abortion clinic manager of 15 years. 1.800.626.9184
House Bill 2076 opponent. Neufeld 785.296.7686 Fed & State Affairs, 2-11-09, 1:30pm

This whole bill smacks of practicing medicine from Topeka and needs litigation. \$\$

65-6709(a)(4) Removed exception for fetal anomalies past 22 weeks gestation.

Force a woman to deliver a fetal anomaly, possibly a genetic disorder like Tay-Sachs, Down Syndrome (older women), numerous other syndromes, Dwarfism, Sickle-cell Trait, Cystic Fibrosis, or a neural tube defect like Spina Bifida (typically crippled), Anencephaly (no brain), Cephaloceles (brain poking through skull), or Hydrocephalus (water-on-the-brain). What good is a Genetic counselor or second-term sonography if you cannot change the path of the pregnancy? How would you explain to your neighbors your boy will be raised as a girl due to androgen-insensitivity? Where would your political career be now? If you terminate the pregnancy earlier, you can always say that you miscarried. Amniocentesis is usually done from 18 weeks to 20 weeks, and by sonography neural tube defects like Spina Bifida not until 18 weeks, very close the State's current 22 week limit. Not much time to Electively abort. Are Ob/Gyn's and Genetic Counselors in this State aware of this ramification?

65-6709(a)(5) Then added contact info for medically challenging pregnancies and free perinatal hospice.

How cruel. I'm gonna force your unhealthy child to be born, then die naturally, but hey, I know a cheap guy to bury 'em. BTW, how much space will "contact info" take on my State-required 24-hour form and why can't it be added to the State's *If You Are Pregnant: Directory of Available Services*? Have these free prenatal services in Kansas been advised of the legislated flood about to tap their limited resources? Will the State help me locate the correct list of these free in-state services?

65-6709(b)(2) Positive. I like having an on-line version available. I don't have to re-type it for our website.

65-6709(c) At least 30 minutes prior to the abortion the woman shall meet privately with the physician and such person's staff to ensure that she has an adequate opportunity to ask questions.

My patients already hate the 2-8 hour wait they endure at the clinic and they have few or no questions. What if it were law that your physician must wait 30 minutes from the time he entered your patient room, to allow you to ask all the questions you want, BEFORE he could then proceed to diagnose your condition or sign off on your blood pressure medicine re-fills? Wouldn't make for economic medicine would it? It's kind of like KSA 65-2837(b)(32) that you passed in 2007 that prohibits us from billing cash pap smears the way we used to, in an effort to stop billing fraud and help lower the cost of medicine in Kansas, that now quadruples the cost of pap smears to our patients (we used to bill \$20, now Missouri LabCorp bills them \$80 and we haven't done any in two years now. My Kansas pathologist refuses to bill cash patients). Poor uninsured women get hurt.

65-6709(i) How will a fetal heart monitor improve the woman's health? I will buy the stupid monitor, no one will take the offer. Is the time stamping by hand or by mechanical clock? So you want an employee time-clock in the sono room? How rude and impersonal.

65-6709(k) Big notice board. I have a copy of that absurd sign that no one will read. Did any of you actually read it all? My patients already gripe because I make them read an 8-page counseling text. They never read any of the Woman's Right to Know literature you legislated in 1997. They receive it and throw it out. Republican waste. What makes you think they will change their mind because of that poster? Laws haven't slowed spousal abuse either, unfortunately.

65-6710(a)(4) A DVD of the *If You Are Pregnant, and If You Are Pregnant: A Directory of Available Services* series, although nice, is a waste of taxpayer money and won't stop any abortions. Really. Where's the Republican fiscal responsibility against wasteful pet programs?

House Fed & State Affairs

Date: 2-11-09

Attachment 21



Testimony of Holly Weatherford, J.D.

Kansas Public Affairs Manager of

Planned Parenthood of Kansas & Mid-Missouri,

in opposition to House Bill No. 2076 and House Bill No. 2166

before the

House Federal and State Affairs Committee

of the Kansas Legislature

February 11, 2009

House Fed & State Affairs

Date: 2-11-09

Attachment 22

Good afternoon. My name is Holly Weatherford and I am the Kansas Public Affairs Manager for Planned Parenthood of Kansas and Mid-Missouri. Thank you for this opportunity to provide testimony on our opposition to HB 2076 and HB 2166. Our not-for-profit organization offers sexuality education, advocacy opportunities, family planning services and a number of surgical services—including abortions—to Kansans in four locations. One of our most important goals is to help men and women make responsible choices that prevent unintended pregnancies. More than ninety percent of our patients come to our agency for family planning and other preventive health services.

For almost 75 years, Planned Parenthood of Kansas & Mid-Missouri has provided the highest quality health care, which includes giving our patients the most comprehensive, medically accurate information available. We are leaders in advocating for educating women about their health care decisions.

At Planned Parenthood, we listen to our patients' concerns. We answer their questions honestly and accurately, reflecting the best up-to-date medical knowledge. We provide all our patients with extensive information so they can make decisions that are right for them and their families.

It has long been a standard practice at Planned Parenthood of Kansas & Mid-Missouri (PPKM) to perform ultrasounds on all patients seeking abortion care, at no additional expense, to confirm gestational age of the pregnancy. Moreover, Planned Parenthood Federation of America's (PPFA) Medical Standards and Guidelines, to which PPKM adheres, were revised in 2008 to make clear that any client who undergoes an ultrasound for any reason must be offered the opportunity to view the ultrasound image and if the client requests a copy of the image, they should be provided one when possible. Standards that stipulate a woman must be offered the opportunity to view her ultrasound image are good customer service and reinforce the belief that clients are making decisions that are right for them.

Representative Kinzer has said his approach this year is to craft a narrower bill designed to "find some common ground with folks who may not necessarily vote pro-life all the time." If finding common ground is truly the goal, then Planned Parenthood of Kansas & Mid-Missouri is available to participate in that discussion.

Planned Parenthood opposes the amendments in HB 2166 removing the mental health exception from relevant sections of Kansas abortion law. Planned Parenthood strongly believes that exceptions must be made for women whose physical or mental health is threatened by their pregnancies. The failure to provide a health exception that clearly covers serious mental health consequences demonstrates a serious lack of understanding of and compassion for women and families who are dealing with tragic circumstances beyond their control.

In closing, Planned Parenthood of Kansas & Mid-Missouri asks this committee to oppose HB 2076 and HB 2166 as they seek only to place more unnecessary restrictions on abortion providers and women seeking abortion care and do nothing to prevent unintended pregnancy or reduce the number of abortions in Kansas.

Thank you.

HB 2076: States who have enacted similar laws

HB 2076: This bill would require that a woman be informed that she can only obtain an abortion after viability if her life is endangered or if the pregnancy causes "a substantial and irreversible impairment of a major bodily function."

- Kansas is the only state to require that a woman be told about the state's postviability abortion law.

HB 2076: This bill requires that women receive information about the availability of free counseling services for "medically challenging pregnancies" and perinatal hospice services.

- Only Minnesota has a similar requirement enacted a couple of years ago.

HB 2076: The bill would also require that included in the Women's Right to Know information be a list of resources available to help a woman with her pregnancy and information on those organizations that provide free ultrasound services.

- Six states have similar requirements. They are Georgia, Indiana, Michigan, Oklahoma, Utah and Wisconsin. http://www.guttmacher.org/statecenter/spibs/spib_RFU.pdf

HB 2076: KDHE would be required to provide the abortion counseling materials and resource information through a website.

- At least 12 states have state run websites with abortion counseling information. They are Alaska, Arkansas, Georgia, Idaho, Louisiana, Michigan, Nebraska, Minnesota, Oklahoma, Texas, West Virginia and South Dakota. Both Women's Health Care Services and Comprehensive Health of Planned Parenthood of Kansas & Mid-Missouri currently have the Kansas materials on their websites.

HB 2076: Before the woman is provided any "medication for the abortion" and at least 30 minutes before the abortion the woman will meet with the physician who will make sure all of her questions are answered.

- Other states have bills with this requirement. Unable to determine if another state has enacted such a law.

HB 2076: The bill would also require that if the physician performs an ultrasound or uses a heart monitor on the fetus, that the physician offers the woman the option of viewing the ultrasound image or listening to the heartbeat of the fetus. The woman would also be offered the option of receiving a picture of the image.

- With regard to ultrasound, Arkansas, Georgia, Idaho, Michigan, Ohio and South Carolina have similar requirements although not all require the physician to offer the woman a picture of the ultrasound http://www.guttmacher.org/statecenter/spibs/spib_RFU.pdf
- Only Indiana as a somewhat similar requirement regarding listening to the fetal heartbeat.

HB 2076: A clinic would also be required to post a notice that informs women that they cannot be coerced into an abortion and that law enforcement agencies are available for protective services.

- Only Oklahoma and Ohio have a similar requirement. The Ohio law was just enacted 1/12/2009 after the governor let it go into effect without his signature.

HB 2076: KDHE would be required to create a video that contains information on resources to assist the woman through pregnancy, the illegality of coerced abortion, adoption and fetal development including ultrasound pictures.

- Alabama and Utah have created a video to be shown to a woman seeking an abortion. Utah's law requires information on fetal development in two week increments, but does not require ultrasound images. Links to Utah's law:

General requirements- http://le.utah.gov/~code/TITLE76/htm/76_07_030500.htm (76-7-305(2)(b)(i))

Detailed Requirements- http://le.utah.gov/~code/TITLE76/htm/76_07_030505.htm

House Fed & State Affairs

Date: 2-11-09

Attachment 23

CURRENT STATUS OF KANSAS LAW ON REPRODUCTIVE HEALTH CARE

KANSAS LAW

The following restrictions to abortion have been passed by the Kansas General Assembly, approved by the Governor and are currently enforced as law:

- **Mandatory information and physician requirements:** K.S.A. 65-6709 requires that women of all ages, except in medical emergencies, certify that they have received certain specific information from a health care provider at least 24 hours before an abortion is to be performed, including materials printed by the State concerning fetal development, abortion procedures and community resources; requires the physician who will perform the abortion to meet privately with the woman before any part of the procedure has taken place. 1997
- **Post-viability ban:** K.S.A. 65-6703 criminalizes post-viability abortions unless the abortion is performed by a physician with a documented referral from an independent physician who agrees that the abortion is necessary to preserve the life of the pregnant woman or that continuation of the pregnancy will cause substantial and irreversible impairment of a major bodily function; requires physicians performing abortions to: determine and document gestational age, and--for those fetuses of 22 weeks or more gestational age--determine and document whether the fetus is viable, and to report such determinations and the basis for same to the Secretary of Health and Environment along with other statistical information about all abortions performed required by K.S.A. 65-445. 1992, 1993, 1998
- **Abortion procedure ban:** K.S.A. 65-6721 criminalizes abortions performed using the intact dilation and extraction method after the fetus becomes viable unless the physician can document that: (1) the abortion is necessary to preserve the life of the pregnant woman; or (2) a continuation of the pregnancy will cause a substantial and irreversible impairment of a major physical or mental function of the pregnant woman. 1998
- **Data collection for bogus abortion-breast cancer link:** K.S.A. 65-1,172 allows confidential health data to be used for investigating the possible cancer risk related to having an abortion. 1997
- **State funds for crisis pregnancy centers, excluding Planned Parenthood:** K.A.R. 28-4-1400 establishes the Stan Clark Pregnancy Maintenance Initiative Grant Program, which awards grants to not-for-profits for services that enable women to carry their pregnancies to term. No organization that refers for, promotes or educates in favor of abortion may apply for the grant. 2005.
- **Parental notification:** K.S.A. 65-6705 provides criminal penalties for physicians who perform an abortion on a minor without first notifying one of her parents or guardians, or obtaining written documentation that such notice has been given, or without evidence that a court has waived the notification requirement; this section also specifies procedures for seeking a judicial waiver of the parental notification requirement. 1992, 1993
- **Mandatory counseling for minors:** K.S.A. 65-6704 specifies special counseling requirements for a minor seeking abortion and that she be accompanied to the counseling by an "interested" adult over the age of twenty-one not affiliated with the abortion provider. 1992
- **Insurance restriction for minors:** K.S.A. 38-2003 excludes abortion from health services covered

under the State children's insurance program, unless (1) the pregnancy is the result of an act of rape, aggravated indecent liberties with a child or incest; or (2) if necessary to save the life of the pregnant woman. 1998

- **Minor fetal tissue collection:** K.A.R. 16-10-3 requires physicians who perform abortion on minors under 14 years of age to collect, preserve and submit fetal tissue to the K.B.I for use as evidence in child rape prosecutions. The minor and her parents' names and addresses must also be reported to the K.B.I. 2005
- **Abortion conscience refusals:** K.S.A. 65-443 allows individuals to refuse to perform or participate in medical procedures that result in the termination of a pregnancy. 1969, 1975. K.S.A. 65-444 allows hospitals, hospital administrators or governing boards to prohibit the termination of pregnancies within their institutions. 1969, 1970
- **Pharmacist conscience refusals:** K.S.A. 65-1637 allows a pharmacist to refuse to fill or refill any prescription if in the pharmacist's professional judgment and discretion such pharmacist is of the opinion that it should not be filled or refilled. 1998
- **Sterilization conscience refusals:** K.S.A. 65-446 allows individuals to refuse to perform or participate in medical procedures that result in the sterilization of a person. 1971
- K.S.A. 65-447 allows hospitals, hospital administrators or governing boards to prohibit procedures resulting in sterilization within their institutions. 1971
- **Ban on use of State facilities for abortions:** K.S.A. 76-3308 prevents any medical facility, hospital or clinic owned, leased or operated by the University of Kansas Hospital Authority from performing an abortion, except in the event of a medical emergency. 1998
- **Application of certain crimes to an "unborn child":** K.S.A. 21-3452 defines "unborn child" as a living individual organism of the species homo sapiens, in utero, at any stage of gestation from fertilization to birth. 2007
- **Miscellaneous restriction:** K.S.A. 65-6706 (a) prohibits a person from offering to pay for an abortion in exchange for the fetal organs or tissues; and (b) prohibits the sale of fetal organs or tissue. 2000

The following bills supporting contraception, abortion access and protections from violence against pregnant women were approved and are in effect.

- **Birth control protection:** K.S.A. 65-6702 (a) prevents the state and its subdivisions from prohibiting the use of contraceptives or the disposition of the products of in vitro fertilization prior to implantation. 1992
- **State jurisdiction over abortion:** K.S.A. 65-6702 (b) prohibits political subdivisions of the state from regulating or restricting abortion. 1992

State of Kansas
House of Representatives

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TOPEKA

COMMITTEE ASSIGNMENTS

CHAIRMAN: ELECTIONS
MEMBER: FEDERAL AND STATE AFFAIRS
LOCAL GOVERNMENT
EDUCATION
JOINT COMMITTEE ON SPECIAL CLAIMS
AGAINST THE STATE
LEGISLATIVE EDUCATION
PLANNING COMMITTEE (LEPC)

February 11, 2009

TO: Chairman Neufeld and fellow Representatives

HB 2166 is a simple bill that will clarify the physical risk exception to the ban on late term abortions. This bill will clarify the original intent that there is no mental health exemption for a late term abortion.

This bill makes no substantial change to our current laws. Such abortions are legal when the mother is at risk of a "physical disorder, physical illness, or physical injury" should the pregnancy proceed.

During the grand jury hearing in Wichita last year, the mental health exemption was at the core of their deliberations. Participants in that hearing made a statement for the need to clarify our laws.

In addition, this topic was discussed during the last Presidential election cycle. President Obama was interviewed last July, and he stated that "mental distress" is not a valid exemption to prohibit late-term abortions.

This bill is an attempt to find bi-partisan common ground on this controversial issue. A copy of the interview with President Obama is attached for your information.

Representative Steve Huebert
District 90

House Fed & State Affairs

Date: 2-11-09

Attachment 25

Rep. Huebert



RELEVANT

RELEVANTMAGAZINE.COM



Q&A With Barack Obama Cameron Strang

Author's Note: On July 1, presumptive Democratic nominee Barack Obama laid out a plan to overhaul the Office of Faith-Based and Community Initiatives. You can find a transcript of the speech here—it's an important read no matter which side of the political spectrum you are on. He talks about the role faith-based organizations will have in his administration, his personal faith and his plans for the renamed President's Council for Faith-Based and Neighborhood Partnerships.

Sen. Obama spoke to me for a few minutes following the speech. Below is the transcript of the conversation, and the audio will run on the RELEVANT Podcast this weekend. Before the speech, we asked our readers to send in questions they'd like us to ask the senator, but unfortunately, because of limited time and a really bad phone connection (he was traveling in southern Ohio at the time), we were not able to get to many of them.

Most of the questions submitted centered on Obama's personal faith and abortion, though they also ran the gamut from war, to the economy, to social security, systemic poverty, AIDS and the environment. What we were able to discuss, as you'll see below, centered on his proposed faith-based initiatives and his views on abortion, as it is such a hot-button issue for many conservative voters. He aimed to clarify his position on late-trimester abortions and addressed rumors surrounding his controversial vote on the "born alive" bill.

Full disclosure: So as not to be seen as giving preferential exposure to any one candidate, we have also sought an interview with John McCain. It looks like an interview will be happening with McCain in the coming weeks. Stay tuned.

—Cameron Strang, publisher

Strang: For a variety of reasons, Congress wouldn't support President Bush's Office of Faith-Based and Community Initiatives. Why do you feel they'll support your plan?

Obama: Based on the assessment of those who actually worked on this in the Bush White House, part of the problem was that the Bush Administration had a tendency to maybe politicize the office unnecessarily. And I think that's a mistake. I think you really have to have an attitude that this is a program designed to help all comers, not just those who supported you politically.

The second thing is that there has to be some very clear criteria and accountability in these programs. I don't think taxpayers want their money wasted, whether it's a faith-based or a secular program, so we've got to be able to document success in whatever programs are funded.

We also want to train more sophisticated groups—the big megachurch or Catholic Charities—to work with the small storefronts, or the synagogue or mosque that doesn't have as much know-how, in applying for federal funds to be able to participate. So I think that if we make it broad, if we have clear standards and clear principles governing the program, if it's not perceived as being an extension of politics but rather a way to ensure services get to the people who need them, then I think we can generate support from Congress.

Strang: Your plan specifically prohibits discriminatory hiring policies based on religion. Don't you think faith-based organizations that would otherwise want to join would bristle at the limitation that they can't hire a staff that reflects their

House Fed & State Affairs

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values?

Obama: I think it's important to distinguish between people who are hired as part of a church to carry out that church's mission or ministries, or administer the church. There's always a religious exemption there from Title VII. It's important for us to make sure that a Christian church can hire Christians or a Jewish church can hire people of the Jewish faith. That's different from programs that are specifically funded by the federal government and offered to the public.

I'm going to have my Council on Faith-Based Partnerships review all our policies, review relevant law and regulations, executive orders and court cases. But the simple principle is that we should not discriminate against faith-based organizations in being able to carry out terrific programs [funded] by the federal government, but we want to make sure that those programs are run in a nondiscriminatory manner.

And that's not going to encroach on the ability of those faith-based organizations to do what they need to do when it comes to their core religious mission. They are going to be able to hire and carry out those functions of a church, or synagogue, mosque or temple, but they can also participate in federal programs as long as those are done in a way that is not encroaching on a separation of church and state, is open to the public and is not involved in proselytizing.

Strang: Not being able to proselytize through a program that receives funding—how would that be enforced?

Obama: You know, the truth of the matter is, a lot of faith-based organizations currently are doing a great job on this issue, and they recognize that when they are administering federal funds, their priority has to be to provide high-quality services and they are not interested in discriminating or proselytizing. Obviously, there may be some who try to use these funds in inappropriate ways, but I think that's the tiny minority of those who really just want to serve their communities and do the right thing.

Strang: Based on emails we received, another issue of deep importance to our readers is a candidate's stance on abortion. We largely know your platform, but there seems to be some real confusion about your position on third-trimester and partial-birth abortions. Can you clarify your stance for us?

Obama: I absolutely can, so please don't believe the emails. I have repeatedly said that I think it's entirely appropriate for states to restrict or even prohibit late-term abortions as long as there is a strict, well-defined exception for the health of the mother. Now, I don't think that "mental distress" qualifies as the health of the mother. I think it has to be a serious physical issue that arises in pregnancy, where there are real, significant problems to the mother carrying that child to term. Otherwise, as long as there is such a medical exception in place, I think we can prohibit late-term abortions.

The other email rumor that's been floating around is that somehow I'm unwilling to see doctors offer life-saving care to children who were born as a result of an induced abortion. That's just false. There was a bill that came up in Illinois that was called the "Born Alive" bill that purported to require life-saving treatment to such infants. And I did vote against that bill. The reason was that there was already a law in place in Illinois that said that you always have to supply life-saving treatment to any infant under any circumstances, and this bill actually was designed to overturn *Roe v. Wade*, so I didn't think it was going to pass constitutional muster.

Ever since that time, emails have been sent out suggesting that, somehow, I would be in favor of letting an infant die in a hospital because of this particular vote. That's not a fair characterization, and that's not an honest characterization. It defies common sense to think that a hospital wouldn't provide life-saving treatment to an infant that was alive and had a chance of survival.

Strang: You've said you're personally against abortion and would like to see a reduction in the number of abortions under your administration. So, as president, how would do you propose accomplishing that?

Obama: I think we know that abortions rise when unwanted pregnancies rise. So, if we are continuing what has been a promising trend in the reduction of teen pregnancies, through education and abstinence education giving good information to teenagers. That is important—emphasizing the sacredness of sexual behavior to our children. I think that's something that we can encourage. I think encouraging adoptions in a significant way. I think the proper role of government. So there are ways that we can make a difference, and those are going to be things I focus on when I am president.

ProKanDo

~ Protecting Women's Rights at the State Level ~

11 February 2009

Chairman Neufeld
House and Federal State Affairs Committee
300 SW 10th St., Suite 161-W
Topeka, KS 66612

Dear Chairman Neufeld and Committee Members:

Thank you for allowing me to address the committee today and voice my concerns regarding HB 2076 and HB 2166. I come before you today in opposition to these two bills.

I have three specific points that I would like to make:

1. HB 2076 works to interfere with the doctor-patient relationship.
2. In this bill, it seems that clinics would be responsible for gathering information about free perinatal hospices before providing it to patients. When doing a search in the Kansas Yellow Pages and online for a Kansas perinatal hospice, I could only find one such hospice located in Kansas—Choices Medical Clinic. This hospice is an organization whose mission is to oppose abortion. Crisis pregnancy centers like this organization often provide politically motivated, misleading or biased information and do not serve the interests of women by giving them full options counseling about their reproductive health choices, which is contrary to the name of this organization. Women are served by being able to make the best decision for themselves and their families, including being able to access abortion free from government interference when it comes to this important life decision. The language in this bill would require reproductive health clinics to provide free marketing services for this politically motivated crisis pregnancy center, and would not protect women.
3. Lastly, I would like to address HB 2166, which seeks to exempt a mental health exception from abortion care. **The United States Supreme Court has long held, and other federal courts have affirmed, that a criminal (post-viability) abortion statute MUST include a mental health exception under the US constitution.** HB 2166 would go directly against this established constitutional standard.

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Attachment 27

ProKanDo

~ Protecting Women's Rights at the State Level ~

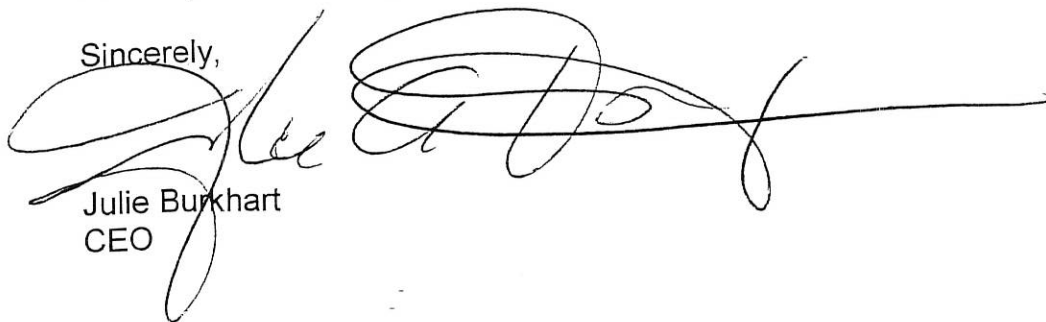
In *Doe v. Bolton*, the companion case to *Roe v. Wade*, the U.S. Supreme Court held that "[M]edical judgment may be exercised in light of all factors—physical, emotional, psychological, familial and the woman's age—relevant to the well-being of the patient. All these factors may relate to health. This allows the attending physician the room he needs to make his best medical judgment." *Doe v. Bolton*, 410 U.S. 179 (1973). The U.S. Supreme Court and lower courts have affirmed that statement since.

The Kansas Supreme Court has accepted and applied this standard specifically to Kansas' post viability law. "Moreover, 'health' has been interpreted by the United States Supreme Court to include the mental or psychological health of the pregnant woman.... Until the United States Supreme Court or the federal Constitution says otherwise, however, the mental health of the pregnant woman remains a consideration necessary to assure the constitutionality of the Kansas criminal abortion statute." *Alpha Medical Clinic v. Anderson*, 280 Kan. 903 (Kan. 2006).

For these reasons, I stand in opposition to the bills at hand. I urge the Committee to reflect upon the doctor-patient relationship and the implications that HB 2076 would have upon that relationship. I ask the Committee to reflect upon the precedent that has been carved into law regarding abortion care and a woman's health and the implications that HB 2166 would have on that long standing exception.

I thank you for hearing my testimony today.

Sincerely,

A large, stylized handwritten signature in black ink, appearing to read 'Julie Burkhart', is written over the typed name and title.

Julie Burkhart
CEO

PO Box 8249
Wichita, KS 67208
316.691.2002 office
316.691.8267 fax
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Testimony of Holly Weatherford, J.D.

Kansas Public Affairs Manager of

Planned Parenthood of Kansas & Mid-Missouri,

in opposition to House Bill No. 2076 and House Bill No. 2166

before the

House Federal and State Affairs Committee

of the Kansas Legislature

February 11, 2009

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Date: 2-11-09

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6301 ANTIOCH • MERRIAM, KANSAS 66202 • PHONE/FAX 913-722-6633 • WWW.KSCATHCONF.ORG

House Committee on Federal and State Affairs

Wednesday, February 11, 2009, 1:30 PM

Testimony in Support of HB 2076

Michael Schuttloffel, Executive Director, Kansas Catholic Conference

Mr. Chairmen and members of the committee, my name is Michael Schuttloffel and I am the executive director of the Kansas Catholic Conference. The Kansas Catholic Conference is the public policy arm of the Catholic Church in the state of Kansas. It is my privilege to appear before you on behalf of Kansas's four bishops and over 400,000 Catholics.

Abortion is an incredibly divisive issue in our country and has been since the Roe v. Wade decision thirty-six years ago. The legislation before you today, however, should serve as common ground for those with opposing views over abortion. Who can oppose a woman's right to information? While the Catholic Church will remain steadfast in its opposition to abortion, it is hopeful that it can join hands with those normally on the other side of the debate in support of HB 2076.

HB 2076 empowers women with information by codifying the common-sense proposition that a woman should be allowed to see the sonogram she has paid for. **With any other medical procedure, it is inconceivable that women would be denied basic information about what they are about to undergo.** If we want women to be able to make a fully informed choice, we should allow her to see the sonogram of her unborn child and listen to the heartbeat. The legislation does not require her to look or to listen. It simply prevents anyone *from preventing her* from having that choice. **It gives the woman the choice.**

The legislation also ensures that women will receive information about free services available to her that can help her with the circumstances of a challenging pregnancy. The Catholic Church offers some of these services, which not only give pregnant women alternatives to abortion, but provide them with aid and hospice services in cases of financial difficulty.

Finally, the anti-coercion sign mandated by the legislation will help to ensure that a woman understands that she cannot be forced to have an abortion against her will. It is a well known fact that many abortions are made out of desperation and even coercion. HB 2076 provides women with a support structure of access to information and protection of rights. **It is impossible to oppose any provision of this bill in the name of helping women.**

The Catholic faith calls us to not only seek the protection of the unborn, but to end the exploitation of women by abortion. Before consenting to an abortion, a woman has the right to have all the facts and to be free of coercion. Let us all support a woman's right to choose to be fully informed.

MOST REVEREND RONALD M. GILMORE, S.T.L., D.D.
DIOCESE OF DODGE CITY

MOST REVEREND JOSEPH F. NAUMANN, D.D.
Chairman of Board
ARCHDIOCESE OF KANSAS CITY IN KANSAS

MOST REVEREND PAUL S. COAKLEY, S.T.L., D.D.
DIOCESE OF SALINA

MOST REVEREND MICHAEL O. JACKELS, S.T.D.
DIOCESE OF WICHITA

MICHAEL M. SCHUTTLOFFEL
EXECUTIVE DIRECTOR

MOST REVEREND EUGENE J. GERBER, S.T.L., D.D.
BISHOP EMERITUS - DIOCESE OF WICHITA

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Written only

Proponent HB 2076 - Testimony of Megan Halstead

February 11, 2009

Chairman Melvin Neufeld and Federal State Affairs committee members,

My name is Megan Halstead, with testimony that supports House bill 2076. Just three weeks ago, my husband, Thad, and I did something we never anticipated. We stood in a cemetery, side by side, with tears streaming down our faces as we buried our infant daughter, Caitlyn Grace.

For my husband and me, the excitement of adding a second child to our family was palpable. When family and friends asked, "Do you want a boy or a girl?" we responded, "We just want a healthy baby." That always seemed like a pat answer, but we would soon find out that it was a much truer answer than we had previously thought.

Just two days before Christmas, December 23, 2008, we received a grim diagnosis for our unborn daughter, Caitlyn. A Topeka perinatologist informed us that at 20 weeks gestation she had a large growth on her neck called a cystic hygroma. This cyst was causing her body to swell with fluid. In addition, we learned she had a rare and serious genetic disorder called Turner Syndrome. The doctor told us Caitlyn was not viable and would soon pass away due to something similar to congestive heart failure.

My husband and I sat in a hospital consultation room as three strangers delivered this painfully difficult and shocking news. **Immediately after receiving the diagnosis, the doctor's first recommendation was to terminate Caitlyn.** The only other option he gave us was to go home and wait for our little girl to die.

Our hearts broke as, moments earlier, we had watched our daughter on the ultrasound screen, her heart beating strongly, despite her tragic condition. We knew that while Caitlyn's heart was beating, we were going to fight for her. However, as kind as the doctors and staff were, they did not direct us to resources to help our daughter. We walked out of the hospital that day with well wishes, but no support, no resources and no direction.

We spent the next two days and nights searching in vain for a resource to help us in our quest to provide Caitlyn with the best chance at dignity and life. Despite our educational background, the wealth of information available on the Internet and our bold determination to find an answer, we soon realized we did not have the tools, information or support to help our child. **We were two parents left with no options to advocate for our unborn daughter who was in need of immediate medical intervention.**

That is when we made the decision to contact Kansans For Life, to help us find a doctor who would be willing to fight for Caitlyn's life. The first thing Kansans For Life did was connect us with a perinatal and infant hospice called, Alexandra's House. It is hard to describe the feeling we had when we discovered this support service. Simply put, we knew we were no longer alone. The volunteers at Alexandra's House have helped hundreds of families through similar situations. They immediately understood what we were dealing with and were willing to do absolutely anything to help. As a family that had never gone through this type of situation, they were able to prepare us for what the next weeks or months might look like. They attended doctor's appointments with us, answered our phone calls at any hour of the day or night, offered

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housing, if needed, counseling, and friendship. They skillfully assisted us in creating a birthing plan and a burial plan.


Most importantly, because Alexandra's House has gained the respect of physicians, especially in the Kansas City area, they were able to quickly connect us with a doctor who explored every available option to help Caitlyn. This new doctor prepared us for all situations and scenarios, not just her eventual passing. He informed us that a very small number of babies with Caitlyn's diagnosis do survive as the cysts can resolve themselves. This was extremely valuable information as parents wanting to do everything possible to help our child. In addition, it showed us that the **immediate option of abortion could have resulted in the loss of an eventually healthy child.** With this new physician working on our behalf we finally felt we had hope and options.

During the weeks following Caitlyn's diagnosis my husband and I leaned on the knowledgeable and caring staff of Alexandra's House. Even during our darkest moments, they never left our side. Staff accompanied us to appointments. They prayed for us, empowered us with information and supported our decision to seek out the nation's leading fetal surgeons who explored cutting edge surgeries for Caitlyn. In the end, her condition proved to be too severe. Our precious daughter passed away on January 13, 2009 at 23 weeks. Even at Caitlyn's passing, the loving volunteers from Alexandra's House remained by our side. They helped us give Caitlyn dignity during her short life and, ultimately, in her death.

It is frightening to find out that your child has a very narrow chance of surviving. It is striking to me that when a baby is **born--** and later diagnosed with a grave illness --the medical community will do whatever is necessary to help that young child. **However, when a baby in utero is diagnosed with a tragic condition, most often the first reaction is to terminate that child's life. Kansas women and children deserve better**

My hope is that no woman would be denied the information and ability to give her dying or sick child dignity and hope during their final hours or weeks of life. All families, in similarly challenging and heart-breaking situations, should be given help to navigate this difficult road. **Even those finding themselves at abortion clinics at the direction of their physician, should receive a full set of options.** It is not only compassionate but respects the rights of mothers and fathers to have complete medical information to guide them. **Alexandra's House is an essential component in this goal and its services should be shared with those who need it most.**

My husband and I do not wish the pain of these past weeks on anyone. But we rejoice that the caring, capable and knowledgeable staff of Alexandra's House is available here in Kansas. I **support the provisions of HB 2076 that will disseminate such desperately needed medical assistance.** Thank you.


Megan Halstead
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Topeka, KS 66604
(785) 232-4370/mmosack@yahoo.com

Feb. 11, 2009

Federal / State Affairs Committee of the Kansas House

Proponent HB 2076, Michelle Armesto-Berge

Good afternoon chairman Neufeld and members of this committee. Thank you for allowing me to address you today in support of House Bill 2076, the Woman's Right to Know and See act, which will help prevent other women from the devastating abortion experience I had at George Tiller's business.

Approximately six years ago I was approaching high school graduation in Kansas, but had a secret from my parents. Although I didn't physically show it very much, I was about 25 weeks pregnant. I was madly in love with my fiancé Pedro (now my husband) and intended to move into his parents' home and start our life together with our baby. My extended family was coming to celebrate my graduation and my plan was to tell my parents when I had the advantage of other relatives there to help support my plan. Unfortunately, a week before that, my mom discovered my pregnancy and found Dr. Tiller's ads on the internet.

COERCED BY TILLER & MY FAMILY

I told her abortion was murder and that I wouldn't do it. They isolated me from outside influences, including Pedro, and had me call Dr. Tiller's clinic to talk to a "counselor" who spent twenty minutes convincing me to abort the baby and go to college. I was still not convinced so I was sent a packet full of information that seemed designed to break down any Christian resistance to abortion. The materials even named a Catholic organization supporting abortion and suggested you could baptize your aborted baby. It seemed very biased.

My parents did not like my fiancé and were dead set on an immediate abortion. I asked my mother if she had it to do all over again would she have aborted me and she said yes. My mother also mentioned how my dad wanted to kill everyone of my fiancé's family members. I was told that I would be kicked out of my family if we did not get to Dr. Tiller's for the next cycle of abortions beginning in two days. At this point I became numb and just went through the motions.

RUSHED THROUGH THE MILL

At Tiller's, I joined a group of 3 other teens and one older women, all who looked 6 - 8 months pregnant. Through conversation, I learned they were all there because of unreliable boyfriends or ambitious parents, like mine, who thought that abortion would solve a problem. Not one of them, myself included, was facing a dire threat to their health. After our group watched a video on "Dr. Tiller's legacy", a nurse took me into a room and prepared me for an ultrasound. When I tried to

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view the screen, the nurse turned it away. I went next to another room where a female doctor injected my unborn child with poison.

MEDICAL RIGHTS VIOLATED

After the procedure that killed my baby, I went to the lobby and joined my mother. I signed all the various papers, some vaguely explaining the laws concerning abortion and privacy. At this time, I met the woman who I had talked to over the phone and she appeared to be a receptionist, not a counselor. After signing the papers, my mother and I went to the business office to pay for the procedure. A nurse took me to an examine room and took my weight and a sample of my blood.

Only AFTER my child was killed, was I given a consent form. Next, a Unitarian pastor came and talked to us and told us how God would forgive us. Then I was sent to a hotel in preparation to deliver my dead child.

Meanwhile, Pedro had suspected I had been whisked away to Wichita for an abortion. After hours on the phone trying to find out what he could do, he decided to drive there and in searching many hotel parking lots, found our car. As we opened the door to leave our room he pleaded with me to leave with him back to safety, but it was too late—our baby had been poisoned to death. He did not realize this and persisted on trying to reach the true me which was buried under a heavy blanket of emotional deadness and pressure from my parents. Within minutes my mother had called the police and they arrived and detained him. Later that day I met with Dr. Tiller, but only for a very few minutes and the subject was mostly on how he would have had his children do the same thing if they were in my shoes.

On the third day, I was made to sit on a toilet at Tiller's facility as my labor peaked. I resented this position and yelled at the nurse and remember distinctly the horrible sight of my dead baby on the floor to the left of the toilet. This image of my helpless baby's body with a full head of hair, seemed strange that he wasn't crying. This vivid memory still haunts me regularly, and has hit even harder during the birthing of my 3 other children.

I was rushed home with a lot of bleeding and cramping but Tiller's clinic never did any follow up care, or even a call. I suffered a lot, but Pedro and I did get married and are happy together raising a family. Years later, when the news media started covering Tiller controversies, I read that late abortions had to have strict medical reasons and the opinion of a second doctor. I started thinking how that did NOT match my experience. I sent for my medical file and found that Tiller had listed my pregnancy as non-viable and had dated it earlier than I knew it to be.

HOW I WAS VICTIMIZED

I am angry that the Kansas abortion law was not followed in my case. I was forced to abort, but if Tiller and his staff had obeyed the law, I might have escaped the hell of that experience.

~ I should have had proper counseling, instead of a receptionist making the "sale" and one-sided "religious" pressure from a group called "Catholics for a Free Choice" and the Unitarian minister promising God's forgiveness.

~ I should have had a proper physical exam and doctor consultation 30 minutes prior to the procedure, not a PR video about Tiller.

~ Tiller's staff should have properly noted my baby's true gestational age, and I would have had to wait for a second physician referral. During that time, Pedro would have found me.

~ Tiller's staff should have honestly admitted my child was viable and I had no physical life-threatening or impairing condition, and sent me home.

What would have happened if HB 2076 had been in effect in 2003:

~I would have read official information saying that abortion ends the life of a unique human being, and would have viewed the official fetal development video, which would have strengthened my arguments for my parents to protect their already-living grandchild in my womb.

~Seeing the posting about forced abortion and law enforcement would have alerted me to an option to resist the coercion and tell a staffer, who also would realize they must not help break the law.

~I would have seen a second physician who was not financially in cahoots with Tiller, who would detect that I was coerced and not in any health danger.

~ I would have chosen to see the sonogram and hear the heart tones and it would have strengthened my resolve, and helped break my acceptance of the situation.

Thank you for your attention to these matters. I hope you will pass this bill, HB 2076.

Michelle Armesto-Berge

1304 SW Boswell Ave

Topeka, KS 66604



February 11, 2009

Chairman Neufeld and members of the House Federal and State Affairs Committee:

I am Judy Smith, State Director of Concerned Woman for America of Kansas. CWA of Kansas stands in support of HB 2076.

Informed consent has been a basic tenet of the medical profession for many years. The idea that one has the right to weigh the risk/benefit of every procedure using the best medical information available is crucial to the integrity of the patient/doctor relationship. In the case of a decision that involves ending a life, the information is vital not only for the fetus but for the mother. Many women do not know that their developing child has a heart-beat at six weeks. Recent improvements in ultrasounds have produced three-dimensional views into the womb that are astounding at all stages of fetal development. To deny a woman the opportunity to see exactly what is developing in her womb is denying her right to make an informed choice. Her entitlement to factual informed consent must not be thwarted by those who would profit from her not knowing her baby's development.

All of the facilities that perform abortions in Kansas itemize sonograms separately for the procedure in the cost the woman pays. Testimony given at a 2007 Interim committee illustrated that the abortionist deliberately turns the ultrasound equipment around so the woman cannot see it. Almost everyone has had a sonogram photograph of their child/ grandchild on their refrigerator door; everyone who sees it is amazed to see the detail and the clarity of that window into the womb. Our most recent grandchildren were twins, so we have several sonogram pictures; one with our precious grandchild sucking her thumb. Drawn illustrations do not give complete information about fetal development with clarity. Allowing a woman to see her child in utero is true informed consent...she can clearly see that it is not a blob of tissue as some have claimed.

In years past, a woman had to wait for the child's movement or quickening for her to understand its viability; now she can hear that unique human's heart beating if she desires. That opportunity should be afforded to her.

Many abortions are forced or coerced either by family members or by the baby's father. A woman has the right to know that a forced abortion is illegal; that threatened abuse constitutes a violation of the law. This should be clearly posted by the abortion facility. In many cases, under-age girls are brought in by pedophiles and rapists; they should have the opportunity to know that this is intolerable under the law by signage placed in the facility.

The U.S. Supreme Court understands that informed consent laws are constitutional; and in fact are necessary to help prevent "the risk that a woman may elect an abortion, only to discover later, with devastating psychological consequences, that her decision was not fully informed."

The abortion industry knows that for them at least, "ignorance is bliss;" the bliss of the bottom line. Women who now have the right to "choose" must at least have ALL the facts before they make that choice.


Judy Smith, State Director

Concerned Women for America of Kansas

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