Testimony of Stephen M. Gordon, D.O. Opposing Senate Bill 95 House Federal and State Affairs Committee March 9, 2015

Mr. Chairman and members of the Committee,

As a practicing obstetrician/gynecologist for 35 years, I have dedicated my life to making women and families healthier and safer. Every year I see hundreds of patients for a range of health care needs, and over my career I have delivered thousands of babies. As a member of the American Board of Obstetrics and Gynecology, a fellow with the American College of Obstetrics and Gynecology, and a graduate from the Kansas City College of Osteopathic Medicine, both science behind the medicine and patient safety are paramount to my practice.

This commitment to my practice and patients make it all the more disturbing to see Kansas politicians legislate their way into my exam room and those of other doctors using non-medical, inflammatory bills meant to restrict access to a safe and legal abortion.

Lawmakers need to understand that for health care providers, the medical care they provide is just one part of the work they do. Health care providers support and trust their patients. A woman who is pregnant and unsure about what to do or where to go turns to her health care provider for accurate and unbiased information about her options: parenting, adoption and abortion. She will receive not only information, but also support, regardless of her decision.

Senate Bill 95 has nothing to do with medicine, but is rather part of a broader effort to restrict or end access to safe, legal abortion in Kansas and across the United States. Ultimately, decisions about whether to choose adoption, end a pregnancy, or raise a child must be left to a woman, her family and her faith, with the counsel of her doctor.

Proponents of this cruel and misguided measure claim that it will only impact a small number of women each year. These callous statistics ignore the real world circumstances faced by women. While nine in 10 abortions in the U.S. occur in the first 12 weeks of pregnancy, it is important that in all cases, a woman and her doctor have every medical option available. In states that have passed other abortion bans that impact pregnancies after 12 weeks, some women and their families have been put into unimaginable situations—needing to end a pregnancy for serious medical reasons, but unable to do so.

Despite efforts to restrict access, abortion is a legal procedure—and it is safe because it is legal. It is a procedure subject to rigorous research, constantly evolving best practices and is part of a regular medical practice for many women's health care providers. Abortion providers adhere to strict medical standards and guidelines which are based on the recommendations from the Centers for Disease Control and Prevention, U.S. Preventive Services Task Force, and the American College of Obstetricians and Gynecologists.

Access to abortion makes women safer. Research has shown that in states where abortion is highly restrictive, women will choose desperate, dangerous and potentially life-threatening means to end an unwanted pregnancy.

These proposed laws—written by politicians and not medical experts—are examples of more smoke and mirrors in a politically motivated attempt to make abortion difficult or impossible to access. Women don't turn to politicians for advice about mammograms, prenatal care, or cancer treatments. Politicians certainly should not be involved in a woman's personal medical decisions about her reproductive health either. Thank you for the opportunity to share my testimony.