

**Oppose HB 2503. It will hurt women, not help them.**

The National Organization for Women's purpose is to take action to bring women into full participation in the mainstream of American society now, exercising all privileges and responsibilities thereof in truly equal partnership with men. Kansas NOW has 760 active members, distributed throughout the state. Those members have agreed upon an agenda that includes increased access to comprehensive healthcare and feel that the passage of HB 2503 would interfere with that goal.

It may seem contradictory for NOW to oppose legislation that claims to make a medical procedure safer for women. After all, we as an organization are very concerned about the quality of care available to women in Kansas. This apparent inconsistency, however, is resolved when one takes a closer look at the intent of HB 2503 and the consequences it would have for women.

In the first place, it must be noted that no other medical procedure is regulated in the way that HB 2503 proposes. The special treatment of abortion may lead us to believe that abortion is a very dangerous type of surgery. Supporters of this type of legislation often refer to the idea that abortion is a unique procedure and therefore requires unique oversight. I would argue that childbirth is also a very distinctive process. Interestingly, women are ten times more likely to die as a result of carrying a pregnancy to term than they are to die as a result of complications associated with abortion, according to the Center for Disease Control. Other routine procedures have fatality rates that even further outweigh the risk of death associated with abortion – it entails half the risk of death involved in a tonsillectomy and one-hundredth the risk of death involved in an appendectomy.

In light of these facts, we must question the urgency of regulating abortion clinics alone. A possible argument would be that abortions are more dangerous in Kansas than in the rest of the country, but the facts do not support this assertion, either. According to the KDHE, there were 152 deaths due to “medical misadventure” between 1990 and 2003. Not one of these deaths were related to abortion services.

Considering that the fatality rate related to abortion procedures has seen an overall decline since abortion was legalized in 1973, and considering that abortions performed in Kansas are no exception to this trend, the goal of HB 2503 is very clear: to place an unnecessary and, in many cases, detrimental burden on abortion clinics. If these restrictions are signed into law, the cost of compliance will be very high for the clinics. In order to cover these costs, they will have to increase the prices of their services, placing them out of reach of many women, arguably the women who most desperately need them. If this is not sufficient, clinics will be forced to close down, leaving women with fewer options.

Increasing the cost of abortions and closing down the clinics that perform them would not protect women's health. In fact, by interfering with women's ability to access and afford reproductive healthcare, HB 2503 would place them in more danger. The most important thing a woman can do to avoid abortion complications is to have the procedure as soon as possible – the earlier the abortion, the safer it is.

This bill, if passed, would work in a number of ways to delay women's abortions and consequentially make them more dangerous. By forcing unnecessary responsibilities and restrictions upon doctors, it would interfere with their ability to work efficiently and provide timely care to patients. By adding to the cost of abortions, it would add to the time it takes many

women to procure the resources necessary to afford this already-expensive procedure. Also, by forcing some clinics out of business, it would make it more difficult and time-consuming to locate and travel to a provider.

All in all, HB 2503 is nothing more than an effort to place abortion out of women's reach. One needs only look, however, to the number of abortions performed before Roe v. Wade (that is, more than at any time since) to realize that women will do whatever they need to do to stay in control over their bodies. Quite simply, women will find ways to have abortions no matter how difficult any legislature may try to make it. For this legislature to callously disregard the health and well-being of these women by delaying their abortions and making them more dangerous would be an insult and a threat to Kansans.

NOW shares the goal of reducing the number of abortions that women must undergo. We, however, believe that there are more effective and less harmful ways to set about this goal. The fact is that the only way to prevent abortions is to prevent unwanted pregnancies. There are a number of proven ways to achieve this goal that, interestingly are not being discussed by the Health and Human Service Committee nor elsewhere in the Kansas Legislature.

80% of teen pregnancies are unplanned. Comprehensive sexuality education, unlike abstinence education, has been proven effective in reducing unwanted pregnancy. It would be in the state's best interest to find ways to encourage the implantation of such a curriculum in all of its schools.

Emergency Contraception, often confused wrongly with medical abortion, is a safe and effective way to reduce the risk of pregnancy for up to five days after intercourse during which protection was either not used or failed. The state should invest in efforts to promote EC and guarantee women's access to it.

According to the Allan Guttmacher Institute, 308,670 Kansas women are in need of contraceptive services and supplies, and 157,410 need public support to get them. The state should work to see that these women have what they need to prevent pregnancies. A good starting point would be requiring insurance companies that cover other prescriptions to cover prescription contraceptives. (Currently, even state employees are not covered for contraception.)

These are just a few of the many ways in which the goal of reducing abortions could be reached while helping – not hurting – women. As for the supposed goal of this legislation, there are a surely ways that all surgical procedures could be made more safe for Kansas women. Targeting abortion clinics alone is not the way to go about making surgery safer.

**NOW opposes HB 2503 and any legislation that is prejudicial toward women.**