

H B

2 6 8

S

Mr. & Mrs. Merle Schultz
P. O. Box 742
Ward Cove, AK 99928

Dear Representative Lincoln,

We are opposed to HB-268

Psalms 139:13 says "For you created my inmost being; you knit me together in my mother's womb."

For this reason we are opposed to government funding for abortion; for abortion as use for birth control; and are against state agencies providing abortions for minors with or without parental consent.

God gave children parents to guide them. At present children need a parent's consent to have an operation even in a life threatening situation. It is ludicrous that they should be allowed to decide for themselves about abortion.

We also feel it is God's will to teach abstinence before marriage - one of the 10 commandments - rather than how not to get pregnant or how to avoid diseases.

Respectfully,
Merle and Beverly Schultz

April 24, 1991

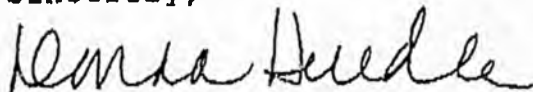
Representative Niilo Koponen
House Finance Committee
Alaska State House of Representatives
Juneau, Alaska

Dear Representative Koponen,

Planned Parenthood of Alaska wholeheartedly endorses CSHB 268, the Reproductive Privacy Act. The Planned Parenthood Federation of America, of which we are a member affiliate, has taken a strong position of advocacy to ensure that abortion remains a legal option for those women who may choose it. This fundamental right that American women have counted upon since the passage of Roe v. Wade in 1973, has been eroded since the Webster decision allowed states to enact legislation regarding abortion. We believe that the choice of abortion as a medical procedure is a profoundly personal decision. Reproductive health care should not be a matter of governmental policy, no more than any other form of medical care.

Planned Parenthood of Alaska supports the Reproductive Privacy Act and will actively work to ensure its passage. We commend you and the bill sponsors for initiating this effort to ensure the availability of reproductive care to all Alaskan women, including poor women who rely on medicaid to finance their medical care.

Sincerely,



Donna E. Hurdle, MSW
Executive Director



1008 West Northern Lights Blvd. • Anchorage, Alaska 99503 • (907) 561-8970

A United Way Agency

LETTER OF SUPPORT



NARAL

*PROPOSED
AMENDMENT*

M E M O R A N D U M

TO: Shari Paul
FROM: Marcy Wilder, NARAL Staff Attorney
DATE: April 23, 1991
RE: Confidentiality Protection in CS for H.B. 268

As we discussed, I suggest you amend page 5, line 10 as follows:

1. Place a period after "disease", and delete the rest of the sentence beginning with "regardless."
2. After the word "disease" on page 5, line 10, add a confidentiality provision. I suggest the following:

No physician, health care worker, or other individual affiliated with a facility at which health care is provided under this section, may notify a minor's parent or guardian about the provision of such health care without the written consent of the minor. In addition, the minor shall be protected by generally applicable guarantees of privilege, confidentiality and privacy.

Alaskans for Life
PO Box 32186
Juneau, AK 99803-2186

April 25, 1991

Representative Pat Carney
Representative Georgianna Lincoln
PO Box V
Juneau, AK 99811

Dear Representatives Carney and Lincoln,

I am writing to you on behalf of Alaskans for Life to voice a strong objection to HB 268.

Our overriding concern is that human life is sacred. To take the life of an innocent child merely for the convenience of its parents or to further their well being, financial or otherwise is a crime against humanity that ultimately degrades the society that sponsors such a policy. When other options exist, why must our State now advocate abortion (the killing of an unborn child) as our preferred alternative? This in itself is reason enough to vote down this bill.

However, if a person accepts the pro-abortion argument, there are other reasons that make this a bad piece of legislation. I will go over them briefly.

Sec. 18.16.020 DECLARATION OF PUBLIC POLICY. "...is a matter of profound personal choice." True enough, but not the entire truth. It is a matter of profound personal choice. But it is also of profound importance to the unborn child who stands in jeopardy of his life. It is of profound importance to the father since genetically, at least, it's half his. (And not all fathers are irresponsible either!) As long as they are willing to assume their responsibility they should have some say in the birth or death of their own children. It's a matter of profound importance to the parents of a pregnant minor daughter. Shouldn't they have some rights in deciding what to do about their child?

Sec. 18.16.030 PROTECTION OF REPRODUCTIVE CHOICE.

1. This section is so sweeping in its scope it is in danger of denying basic freedom of speech and conscience to many in the medical profession. The term "an instrumentality of the State" could conceivably refer to medical facilities receiving State funds, State-licensed medical practitioners, school districts, or elected officials expressing their personal opinions. How far could this be interpreted? Unfortunately, you do not really know.
2. Same section, subsection (c)(1). The use of the term "whether intentional or unintentional" --rather broad a statement I'd say! In fact the whole subsection is rather broad.

3. The use of the term viability and its definition in (c)(4) is useless and misleading. Why bother to mention viability when you can go ahead and abort after it occurs? The phrase "to preserve the woman's life and health" is the standard boilerplate on most permissive abortion legislation. It does nothing to limit abortion and should not be in here. All it does is give false hope to the feeble minded.
4. Mixing contraception and abortion in the same piece of legislation is poor form. They are two very separate issues evoking very different responses. To mix them together leads to a confused response because objection to one issue will probably be confused with objection to the other or both. If you are going to have a contraception bill, have a contraception bill. If you are going to have an abortion bill, have an abortion bill.

Sec. 18.16.100 SHORT TITLE. This should be retitled as "The Abortion-on-Demand Bill."

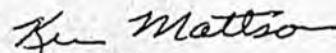
Sec. 3. AS 08.64.326(a) If this is saying what I think it is saying, it says that a hospital or doctor could have a license taken away if they interfere in an abortion "whether intentional or unintentional" (see page 2, lines 12-14 of this bill). The State Medical Board has the power to violate the freedom of speech and conscience of doctors, medical personnel, and even religiously based hospitals such as Providence Hospital if this bill goes into effect. Their choice seems to be to go along with the pro-abortion mentality in spite of deeply held convictions they might have, or suffer "sanctions" the Board "may impose" (page 3, line 3).

Sec. 47.25.197 PAYMENT FOR ABORTIONS. NOT ON YOUR LIFE!!!!!! YOU CAN USE YOUR OWN MONEY!!!!!! STATE MONEY IS PARTLY MY MONEY AND I REFUSE TO USE MY SHARE TO PAY FOR ABORTION!!!!!! IF YOU'RE SO COMPASSIONATE, DONATE YOUR OWN MONEY!!!!!! Also you will be putting thousands of your own citizens in deep and profound opposition to the State. Pro-life people, such as myself, will have a distrust, disgust and disrespect for any government that so violates our most deeply held convictions. You underestimate the enmity that we can hold toward so evil an organization that takes our money to do deeds we hold to be against our conscience. This certainly is no way to bring a State together.

Why wasn't this bill sent to the Judiciary Committee? Don't you believe in your own system? Why didn't you give more time for review of this bill?

Are you afraid someone might see it? Outside of this, I can't think of one good thing to say about this bill.

Sincerely,



Ken Mattson, President
Alaskans for Life



Alaska State Legislature

Please enter into the record my testimony to the Health, Education & Social Services
committee name

committee on House Bill No. 268, dated 4-10-91
bill/subject

I am opposed to House Bill No. 268 and Senate Bill No. 249. I am very much in favor of people having freedom to choose. I am also very much in favor of people being held responsible and accountable for the consequences of their choices. I believe that is not a unique position since the U.S. and its entire legal system is founded upon those principles. If someone chooses to become a criminal, they are punished according to the nature and degree of their crime. They do not escape punishment by deciding at the time of sentencing to become a non-criminal. If they could, anarchy would reign throughout the country.

If a person chooses to shoot a gun, they have at that point lost the choice to have the bullet stay in the gun or return to it without damaging anything in its trajectory. If a person chooses to engage in sex, they have pulled a trigger. If they then are allowed to destroy another individual just to avoid the responsibility for the consequences of their choice, they are being encouraged to violate the very principles that are fundamental to maintaining the liberty and freedom that we in the U.S. so highly prize. If people are encouraged to avoid responsibility for their actions regarding something as serious as life, can they really be expected to be responsible in other important aspects of our national character? For government to allow indiscriminate abortion is a great tragedy. For government to finance it is unconscionable. Please kill HB268 and SB249.

Signed: Edward B. Meckham
Testifier

Representing (Optional) PO. Box 5975
5895 Roosevelt Drive, Ketchikan, AK 99901
Address
(907) 225-9306
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HESS
 committee name
 committee on HB 268, dated 4/10/91
 bill/subject

I URGE SUPPORT OF THE ABOVE BILL.

WE MUST NOT ALLOW THE CHURCHES IN ALASKA

TO SET OUR LAWS. SOME OF THESE RELIGIOUS
 EVEN
 WOULD DENY ACCESS TO BIRTH CONTROL.
 1

PLEASE CONTINUE THE RIGHT OF CHOICE
 FOR ALASKA WOMEN.

Signed: Alyson M. Maynard
 Testifier

Myself
 Representing (Optional)

2237 Forest Park Dr. 99517
 Address

272-3357
 Phone No.



Alaska State Legislature

Senate

Please enter into the record my testimony to the Health, Education & Social Services,
committee name

Finance committee on SB-249, dated 4/12/91
bill/subject

I strongly urge passage of HB-268 & SB-249 to ensure protection of women's rights to abortion and birth control. A woman's ability to control pregnancy has a direct affect on the quality of her life as well as that of any offspring she may bear. Any hope of overcoming many of our social problems stems from our capability to control reproduction.

Just as a woman has a right to pre-natal and post-natal care, so should she be guaranteed access to all types of birth control. Each woman's chemistry varies & it's therefore imperative that all forms of birth control be available to enable her to choose one that is effective.

Just as having a child is a personal choice which should solely be a decision of the woman, so should be abortion. A woman should not be subjected to humiliation, mutilation or possible death by being forced to seek illegal abortion because of lack of funding for abortions through Medicaid or general relief medical assistance. Choosing abortion is an intensely personal decision which can and should ultimately be decided by the woman herself. Often it is a tragedy for a woman to have to make this decision due to economics, but it is also a tragedy for a woman to be forced to carry a pregnancy to term, often threatening her ability to provide for herself, or forcing her to discontinue her education which is the major factor in her ability to provide adequate care to a family.

I think HB-268 and SB-249 are well-thought and written bills that should be supported and passed. Women must have the right to commence, prevent, continue or terminate a pregnancy, which is a matter of profound personal choice. A woman's right to abortion should not be hindered by her economic status.

Signed: Jill Dobrydnia *Jill Dobrydnia*
Testifier

I am a member of the Coalition of Alaskans for Choice-Ketchikan,
Representing (Optional) testifying as an individual

P. O. Box 653, Ward Cove, AK 99928
Address

247-2307
Phone No.

256

COALITION OF ALASKANS FOR CHOICE - ANCHORAGE



April 18, 1991

Representative Niilo Koponen
Alaska State House of Representatives
P.O. Box V
Juneau, Alaska 99801

Dear Representative Koponen:

The Coalition of Alaskans for Choice wholeheartedly endorses House Bill 268, the Reproductive Privacy Act.

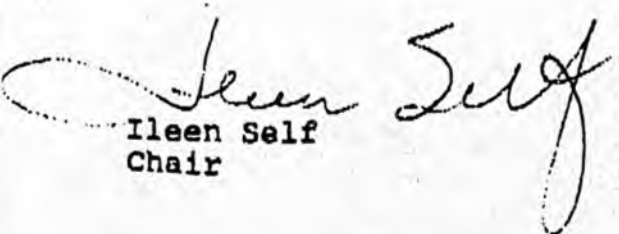
Our top legislative priorities are to keep abortion safe and legal and to protect public funding for abortions for poor women. This legislation addresses both. We support it in its entirety.

Since the United States Supreme Court struck down state laws banning abortion, the Constitution has protected our most basic personal rights. Some antiabortion legislatures and governors have sought ways, however, to erode these rights through restrictive legislation and regulation. The present Governor of Alaska is a member of this group, and now, more than ever, we need strong language in our statutes that protects our privacy in reproductive planning.

The decision to commence, continue or terminate a pregnancy is a profoundly personal matter, and not an arena for governmental interference and coercion. Our self determination as women depends upon our retaining legal authority over our private lives.

Thank you, Representative Koponen, for your support.

Sincerely,


Ileen Self
Chair

Post Office Box 232472
Anchorage, Alaska 99523

- Letters of Support -



Alaska State House of Representatives
Capitol Building
P.O. Box V
Juneau, Alaska 99981

To all Representatives:

The Alaska Women's Political Caucus unequivocally supports HB 268, "An Act providing for a woman's right to choose abortion without governmental interference; protecting the right to use birth control; relating to payment for abortions under Medicaid and general relief assistance; and providing for an effective date."

This legislation is imperative to protect the constitutional right of all women to choose whether or not to have an abortion. The Hickel Administration's intended policy to deny general relief medical assistance funding for poor women seeking abortions discriminates on the rights of these women in two ways.

First, it discriminates against them on the basis of poverty or employment status, for it will deny them the right to an abortion which many women can afford without government relief. Second, it infringes on their constitutional right to privacy, effectively denying them the right to choose whether or not to have an abortion, although acknowledging their need for and entitlement to general medical relief for other medical needs.

We strongly urge you to move quickly on this issue and to enact this legislation as it was introduced by Representatives Kopenen, Boyer, Ellis, Finkelstein, Lincoln, C. Davis, Carney, Donley, Moyer, Navarre, Ulmer, Gruenberg, and Brown.

ALASKA WOMEN'S POLITICAL CAUCUS

Theda Pittman
Chair

Beth Phillips
Vice-Chair

P.O. Box 1571
Anchorage, Alaska
99510

SUSAN M. ANSTINE, M.S.W.
18644 PUFFIN WAY
ANCHORAGE, ALASKA 99516

April 19, 1991

Representative N. Kaponen
House of Representatives
P.O. Box V
Juneau, Ak. 99811

Dear Representative Kaponen,

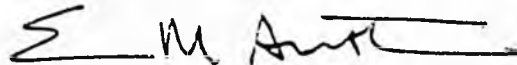
I am writing to express my strong support for HB 268: an act which provides for a woman's right to choose abortion without governmental interference and protects all women's access to reproductive freedom.

As a clinical social worker I have seen the crises and despair of women facing unwanted pregnancies. My mother and many of my friends underwent the humiliation and danger of illegal abortions. My sister was fortunate enough to have access to legal abortion services when she became one of the "failure" statistics while correcting using a diaphragm.

Unwanted children rarely become wanted after they are born. They are likely to experience more health problems, as well as become victims of abuse and neglect. My caseload over the last 20 years is full of stories of children whose lives do not have happy endings.

I will work very hard to promote passage of this bill and thank you for your support of the men and women of Alaska.

Sincerely,



Susan M. Anstine



**ALASKA CHAPTER
NATIONAL ASSOCIATION OF
SOCIAL WORKERS**

8923 Tanis Drive
Juneau, Alaska 99801
(907) 789-7099

Executive Director
William Diebels, LCSW

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Melinda Glass, ACSW
Bethel

STUDENT REPRESENTATIVE

Bernie Person
Anchorage

POSITION PAPER
SB 249, REPRODUCTIVE PRIVACY ACT

The Alaska Chapter of the National Association of Social Workers (NASW) strongly supports the passage of SB 249, Reproductive Privacy Act. On a national basis, NASW's Delegate Assembly established a policy affirming a woman's right to choose whether to have an abortion. NASW's position on abortion is to support self-determination, or a woman's right to make her own choice about abortion.

The Honorable Justice Blackmun wrote, "... Every year many women, especially poor and minority women, would die or suffer debilitating physical trauma, all in the name of enforced morality or religious dictates or lack of compassion, as it may be..." He warned of the danger of overturning "a constitutional decision that secured a fundamental personal liberty to millions of persons."

The Alaska Chapter of NASW believes that this bill will continue to guarantee women their rights. We support SB249 in its entirety. Reproductive privacy, including abortion, is a matter of individual conscience, not governmental coercion. Reproductive choices of Alaskans must be protected by law.

Respectfully submitted,

Nina Kinney, MSW, LCSW
President, Alaska Chapter

4410 N. Douglas Hwy.
Juneau, AK 99801
April 21, 1991

TO = H.E.S.S. COMMITTEE MEMBERS

I am strongly opposed to HB #268 and SB #249, liberalizing Alaska's abortion statutes, because they take away the rights of doctors and parents, remove a patient's opportunity for counseling and education, endanger public health and safety, and require the use of public tax dollars for destroying human lives, something I am morally opposed to.

Specifically these bills provide for:

- eliminating the current requirement that abortions be performed by a physician or surgeon licensed by the State Medical Board,
- eliminating the current requirement that abortions be performed in a hospital or other facility approved by the state or federal government,
- abortions for girls under 18 without parental notification,
- taking away the existing right of a hospital or doctor to conscientiously object to participating in an abortion,
- promoting abortion by forbidding waiting periods, counseling or alternatives that may delay, increase the cost of or limit the availability of an abortion,
- requiring the State of Alaska to use tax dollars to pay for abortions.

I have recently read an interesting book entitled Grand Illusions, the Legacy of Planned Parenthood, by George Grant. All legislators dealing with this type of legislation should inform themselves of the dangers of abortion by reading this book. I obtained the book through the Juneau Library Inter-library Loan.

Please use your influence to defeat these bills because they are not in the public interest.

Sincerely,

Phillip L. Gray
Carol J. Gray

4-25-91



RECEIVED
APR 22 A.M.

Alaska State House of Representatives
Capitol Building
P.O. Box V
Juneau, Alaska 99981

To all Representatives:

The Alaska Women's Political Caucus unequivocally supports HB 268, "An Act providing for a woman's right to choose abortion without governmental interference; protecting the right to use birth control; relating to payment for abortions under Medicaid and general relief assistance; and providing for an effective date."

This legislation is imperative to protect the constitutional right of all women to choose whether or not to have an abortion. The Hickel Administration's intended policy to deny general relief medical assistance funding for poor women seeking abortions discriminates on the rights of these women in two ways.

First, it discriminates against them on the basis of poverty or employment status, for it will deny them the right to an abortion which many women can afford without government relief. Second, it infringes on their constitutional right to privacy, effectively denying them the right to choose whether or not to have an abortion, although acknowledging their need for and entitlement to general medical relief for other medical needs.

We strongly urge you to move quickly on this issue and to enact this legislation as it was introduced by Representatives Kopenen, Boyer, Ellis, Finkelstein, Lincoln, C. Davis, Carney, Donley, Moyer, Navarre, Ulmer, Gruenberg, and Brown.

ALASKA WOMEN'S POLITICAL CAUCUS

Theda Pittman
Chair

Beth Phillips
Vice-Chair

P.O. Box 1571
Anchorage, Alaska
99510

Alaska State Legislature



SENATOR ARLISS STURGULEWSKI, Chairman
SENATOR PAUL FISCHER, Vice Chairman
SENATOR SAM COTTEN
SENATOR LYMAN HOFFMAN
SENATOR CURT MENARD

P.O. BOX V
ROOM 427
STATE CAPITOL
JUNEAU, ALASKA 99811
(907) 465-3762

Senate Committee on Health, Education and Social Services

MEMORANDUM

22 April 1991

TO: Members, Senate HESS Committee
FROM: Senator Arliss Sturgulewski *AS*

*@ table
x3
table plates*

We have been invited to attend the House HESS Committee meeting scheduled for Thursday, 25 April 1991 at 8:00 am. House Bill 268 which is a companion bill to SB 249 currently in our committee.

There will be testimony by representatives of the National Abortion Rights League and National Right to Life on this legislation.

*248
247
268*

COALITION OF ALASKANS
FOR CHOICE - ANCHORAGE



RECEIVED
MAR 28 P.M.

March 22, 1991

The Honorable Georgianna Lincoln
Alaska State House of Representatives
P.O. Box V
Juneau, AK 99811

Dear Representative Lincoln:

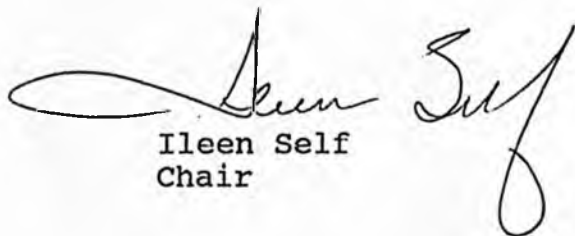
The Coalition of Alaskans for Choice in Anchorage is a non-profit organization established in 1989 to protect reproductive freedom in Alaska through research, education, and political action. We work in cooperation with organizations of like purpose throughout Alaska to accomplish our goals.

Attached is a copy of our legislative position. Our position is stated broadly; as you consider specific legislation, our members will contact you further to express their views.

We would appreciate hearing from you in regard to our position. Specifically, we would like to know whether or not you support a woman's right to an abortion as provided for by current law and whether or not you support public funding for abortions for poor women.

Please feel free to contact me personally if you have any questions regarding our position or would like to discuss this further. My home telephone number in Anchorage is 522-1740. I look forward to working with you.

Sincerely,


Ileen Self
Chair

Post Office Box 232472
Anchorage, Alaska 99523
(907) 274-9308

COALITION OF ALASKANS FOR CHOICE LEGISLATIVE POSITION

The Coalition of Alaskans for Choice exists to protect reproductive freedom in Alaska. At the core of reproductive freedom is the inalienable right of a woman, regardless of her age or economic station, to choose to terminate an unwanted pregnancy.

The right of choice, however, is much more than the right to abortion on demand. Choice includes access to reproductive health and family planning information and services; sexuality education in the schools; research and development of safe, effective contraception; prenatal care, healthy baby and parent education programs; and adoption services.

A legislative program that truly supports families encompasses all of these services. This full range of options presents women and men with meaningful family planning choices.

The Coalition of Alaskans for Choice supports public policy and specific legislation which:

1. keeps abortion safe and legal;
2. keeps abortion accessible to poor women through public funding;
3. provides full and adequate funding for family planning services;
4. mandates sexuality education as part of the public school health education curriculum;
5. promotes the prevention of birth defects and fetal alcohol syndrome without infringing on the civil rights of pregnant women;
6. encourages utilization of family planning services by minors; and
7. recognizes that a living will protects a woman's right to die, even when pregnant.

The Coalition of Alaskans for Choice opposes any legislation which:

1. restricts a woman's access to an abortion;
2. elevates fetal rights above those of a pregnant woman; or
3. restricts minors' rights to family planning and abortion services.

April 22, 1991

James Gray
1820 Kuskokwim Street
Anchorage, Alaska 99508

Rep. Georgianna Lincoln
P.O. Box V
Juneau, Alaska 99811

Dear Rep. Lincoln,

This letter concerns the mental health lands trust dispute and related issues. I would like to encourage you to make sure that human rights are maintained when this matter is settled. Right now Alaska law allows for people to receive involuntary psychiatric treatment with drugs. These drugs have dangerous and debilitating effects on the mind and body. A person could stay clear of illegal drugs, tobacco, alcohol and aspirin their entire life and then wind up damaged by psychiatric drugs. A change in Alaska law to prohibit involuntary drugging is in order. A statement added to any settlement bill prohibiting any of the money from being used for involuntary and/or coercive drugging is in order. Also, at least 50% of the funding should go to programs that don't involve psychiatric drugging.

For people on the receiving end of psychiatric drugging the effects can be bone marrow poisoning, hallucinations, liver damage, sedation, drowsiness, difficulty thinking, nightmares, apathy, depression, impotence, despair, blurred vision, nausea, vomiting, low blood pressure, epileptic seizures, hepatitis, glaucoma, decrease in white blood cell count, brain damage and death.

Alaskan Natives, after having their culture destroyed, can line up as well for psychiatric drugging. Maybe they won't notice what they have lost.

The alternatives to drugs are understanding, housing, clothing, food, dignity, money, respect, employment (unemployment and underemployment are both on top of the list as causes of "mental illness") and generally diverting the resources from psychiatric salaries to individuals.

The present law allowing for involuntary drugging is in violation of the Alaska Constitution. Drugs remove "a natural right to life, liberty, the pursuit of happiness." Freedom of religion is violated because psychiatry is established as a State religion. Visions and hearing voices are often interpreted as a "psychosis" in need of drugs. Article I,

Section 21 is violated, it states that, "The enumeration of rights in this constitution shall not impair or deny others retained by the people." Article VII, Section 4 is violated since it requires, "The legislature shall provide for the promotion and protection of public health." Article I, Section 22 reads, "The right of the people to privacy is recognized and shall not be infringed. The legislature shall implement this section."

The involuntary drugging law is required because even "mentally disturbed" people know that these drugs are painful and dangerous. The very nature of the law implies that the people being given involuntary treatment are incapable of giving informed consent to medical experimentation! The Alaskan legislature can send the message to psychiatry that, "No, means no."

Involuntary drugging is allowed to go on until a person, "no longer poses a danger to himself or others." This idea implies that it is possible to predict the future for people. In fact, it isn't possible, with any accuracy, to predict what anyone is going to do. It certainly would be nice to be able to figure out who is going to commit a crime and send them to jail before they do it.

The psychiatric belief, that mental illness is caused by chemical imbalances in the brain, is unproven.

The drug Ritalin is being given to children in Alaskan schools because it makes the children more manageable in the classroom. It is often the bright children who are drugged, because they are smarter than the teacher and are bored. One side effect from Ritalin is "psychosis". Ritalin is in the class of drugs with cocaine.

Legislation, requiring dentists to inform their clients what is being put into their mouths, is wise. Mercury poisoning is a known cause of "mental illness." Sometimes the brain's chemistry is altered by environmental poisoning. Psychiatric drugs just mask the symptoms.

It has been said that a person's body can be imprisoned, but the mind is free. Alaskan psychiatry is now going after minds as well.

Thank you. I hope that this information will help you in making any decisions related to these matters.

Sincerely yours,



James Gray

April 22, 1991

Mrs. Ronda K. Smith
P.O. Box 140826
Anchorage Alaska 99514

Legislator Lincoln
P.O. Box V
Juneau Alaska 99811

Dear Legislator,

Subject: ~~House Bill No. 208~~ or ~~any other proposed~~
~~compromising legislation aimed at revising such~~
~~abortion regulations~~ such as ~~SB 249~~ or ~~170~~ or ~~174~~

Koponen, Boyer, Ellis, Finkelstein, Lincoln, C. Davis, Carney,
Donley, Moyer, Navaar, Ulmer, Gruening, Brown, Sturgelewski,
Fahrenkamp, Rodey, Adams, co-sponsor Liberalization of
Alaska's Restrictions on Abortion.

~~I strongly oppose their opposition.~~ I not only will ~~never~~
~~vote for any of these people~~ again because of their stand, but
I ~~will strongly campaign against them.~~

This bill would be:

- ~~Forcing Doctors to~~ do abortions which ~~creates~~ their
~~hypocratic oaths.~~ (Making my doctor a murderer)
- ~~Overstepping right as a parent to guide, nurture, and~~
~~protect my minor children from questionable sex education, and~~
~~uninformed consent to abortions without parental notification.~~
- ~~Permitting abortion peddlers to do an abortion to minors~~
~~anywhere, anytime, by anyone with no safety standards.~~
- ~~Using my tax dollars to fund abortions, thus, bringing me~~
~~in as an accomplice to murder - which I refuse to do.~~
(Medicaide is already sending anyone over 24 weeks along to
lower 48 for abortions).
- ~~Taking the preferences of a few and forcing them on the~~
~~masses, to be funded by the masses.~~

Sincerely,
Mrs. Ronda K. Smith
Mrs. Ronda K. Smith
Missionary

Shame
on
you!

200 West 34th Avenue
Suite #187
Anchorage, AK 99503

RECEIVED
APR 26 P.M.

April 23, 1991

Representative, Georgianna
P. O. Box V
Juneau, AK 99811

Representative, Lincoln:

I feel that Alaska has very liberal abortion statutes. Please vote against House Bill Number 268.

By eliminating the current requirements that a physician or surgeon be licensed this will endanger Alaskan's. This bill also takes away the current requirement that abortions be performed in a hospital or other facility approved by the State.

This bill is filled with radical approaches that will cause emotional and health concerns for Alaskan's. Please vote no on this bill.

Sincerely,



Daniel A. Le Blanc
(907) 333-2825

April 23, 1991

Ms. Georgianna Lincoln
Alaska State Legislature
P. O. Box V (mail stop:3100)
Juneau, Alaska 99811

RECEIVED
APR 25 P.M.

Dear Ms. Lincoln:

I was born and raised in Ketchikan, Alaska. I have enjoyed the beauty of this town and state for 29 years. It brings a good feeling to know that along with Alaska beauty it is also very a wealthy land.

I am disturbed that House Bill #268, if passed, will allow state mney--MY MONEY--to be spent destroying precious innocent children by abortion. It will also undermine important family values by taking the responsibility that belongs to parents and placing it to the States control as to deciding weather a minor child can have an abortion, receive contraceptives, etc. Also, I do not want my state to, in its laws, except Abortion as an "Alternative Method of Birth Control".

DO NOT VOTE FOR THIS BILL. Vote against it and protect Alaskas wealth and integrity from the shedding of innocent blood.

Thank you,

Bill Jeffrey White
P. O. Box 9148
Ketchikan, Alaska 99901

April 23, 1991

Greetings:

Sitkans for Choice supports HB 288-a woman's right to choose. This bill respects the right to privacy and honors religious freedom while refusing interference in the practice of medicine. It is obviously in tune with public opinion in Sitka and the rest of Alaska based on state law and the recent gubernatorial election. 61% of Alaska's voters and 67% of Sitka voters supported pro-choice candidates.

Our feelings toward abortion are reflected by this statement by the Episcopal Women's Caucus.

"We are deeply disturbed over the increasingly bitter and divisive battle being waged in legislative bodies to force continuance of unwanted pregnancies and to limit an American woman's right to abortion.

We believe that all should be free to exercise their own consciences on this matter and that where widely differing views are held by substantial sections of the American religious community, the particular belief of one religious body should not be forced on those who believe otherwise.

To prohibit or severely limit the use of public funds to pay for abortions abridges and denies the right to an abortion and discriminates especially against low income, young and minority women."

Present Alaskan law allows each person to make their own decisions.

Abortion has been practiced since at least 2500 B.C. and will continue, whether legal or illegal, whether safe or unsafe. Removing safe abortions especially penalizes the young, the poor, and minorities.

Again, we would like to reiterate our support for HB288 and to thank Representative Koponen for introducing the bill and, in doing so, considering the health care of the entire state.

Sincerely,

Luth & McKenji

Sitkans for Choice
Box 2966
Sitka, Alaska 99835



Alaska State Legislature

Please enter into the record my testimony to the HESS
 committee name
 committee on HB 268 , dated 4-23-91
 bill/subject

I am pro-choice - I support the right of a woman to choose whether or not to engage in sexual relations, and what kind or, whether to use birth control. I support the right for the baby to choose life ~~and~~ the choice of the father to choose ~~parent hood~~ the choice of the grandparent to choose to hold their grand child.

HB268 does not protect the choices of all the people involved. This includes the choice of the health care providers.

I urge you to about this bill in committee to protect the rights of choice for all the citizens of our state.

Signed: Karen Christner
 Testifier

Representing (Optional)
301 Wandman, Sitka
 Address
747-6930
 Phone No.

RECEIVED

APR 24 P.M.

Representative Georgiana Lincoln
PO Box V
Juneau, AK 99811

Dear Georgiana:

I trust you are supporting House Bill 268 which would allow for equal access of all Alaskans to family planning and abortion rights. I understand an expedited hearing in the House HESS Committee will give the bill at least a fighting chance during this session. Please do all you can to usher this important bill forward.

I had the pleasure of watching you speak at the White House Conference on Families in 1980 in Fairbanks. I was very impressed with your passionate support of extended families. I am very happy you are in the legislature. May your tenure be long, rewarding and prosperous for all Alaskans.

Sincerely,



Liz Illg
1220 E. 16th #10
Anchorage, AK 99501

HB268/SB249

HB268/SB249 Statement

My wife, and myself have a strong opposition to these bills. Our opposition is based on the fact that you are excluding the wishes of a large majority of citizens of the United States. The current consensus based on a Gallup survey is that the abortion industry is operating with too little controls currently.

The Gallup survey I am quoting from was conducted last year and released to the public on February 28 of this year. It consisted of a random survey of 2,174 voting age adults.

Findings are that the public is not even very informed as to the legal status of abortion in America and its liberal attitudes. Of those surveyed, only 1 in 9 could accurately describe the holdings in the Roe Vs. Wade decision. When asked about use of abortion as a means of birth control 69% of americans were firmly against this practice. Which is the primary use of abortion.

Of those surveyed 76 percent said they were either highly or very concerned with the issue of abortion.

Of those surveyed 42 percent thought that Roe Vs. Wade only allowed abortions during the first three months.

A large 83% of the public supports legislation that requires parental involvement in the decision of a minor to undergo the surgical procedures of an abortion.

91 percent of the public also disapproved of abortions for sex-selection.

In states that currently limit some abortions 70 percent of respondents favored large punitive fines for abortionists performing illegal abortions.

77 percent were opposed to abortion for financial reasons - such as interference with a womens career goals.

55 percent even supported legislation that would require that the women to get the consent of the baby's biological father before having an abortion.

86 percent mostly favored a state requirement that a women desiring an abortion be properly educated as to fetal development, and alternatives such as adoption.

55 percent thought that the unborn baby's right to be born should outweigh the women's right to chose whether she wants the child or not - this would be from the moment of conception on.

When posed with the statement "all human life, including that of the unborn, should be protected" either very convincing or fairly convincing, respondents were a large 75 percent.

And finally, 77 percent thought that at a minimum, abortion takes a human life.

What we see of this proposed legislation is that it is in direct opposition to the wishes of the public and I urge you to kill this legislation as soon as possible rather than kill more unborn alaskans.

JOHN & JUDY WHISMAN
4700 E 113TH
ANCHORAGE AK 99516-1619

PH 346-3238

To (H) & (S) HESS Committees

Testimony

concerning HB 268 & SB 249

Government programs should not fund the optional surgeries of anybody. Since women can't be forced into or out of abortions, it follows that taxpayers shouldn't be forced to participate in abortions either. I urge you to vote against the double standards of HB 268 & SB 249 (42 words)

concerning HB 268 & SB 249

Page 3 lines 3, 19 & 20, page 4 lines 2 & 3 are an outrageous contradiction to the very principles of choice that abortion laws promote. Why force your standard on licensees while pro-life standards can't be forced on women? I urge you to squelch this ridiculous proposal. (50 words)

concerning HB 268 & SB 249

Page 4 beginning on line 14. Who's in charge of what? Aren't parents legally responsible for their minor children? Only emancipated minors should have the authority to choose or refuse optional medical services. Please vote against HB 268 & SB 249. (41 words)

concerning HB 268 & SB 249

Page 2 line 30. Why shouldn't there be a mandatory delay? If the "choice" is an uninformed deference to liberal brain washing it isn't a "choice" at all. Knowledge of the lifelong physical & emotional hazards, & all alternatives should be mandatory for any surgery candidate. (46 words)

concerning HB 268 & SB 249

Considerate professionals should write house bills that high school graduates can understand, otherwise I'd think you were trying to pull the wool over our eyes. That's exactly the case with the seemingly deceitful words of these bills. After 2 days of study I now understand & oppose them both. (49 words)



Lois Ann Sauls

1508 W. 43rd #28

Anchorage, AK 99503

(907) 561-1411

April 24, 1991

. DAVE LANTZ
. 7520 ROUENNA
. ANCH AK 99518
.

. REPRESENTATIVE LINCOLN
. P.O. BOX V
. JUNEAU AK 99811

Dear Legislator,

Subject: House Bill No. 268 or any other proposed compromising legislation aimed at revising tough abortion regulations such as SB 249 or 170 or 174.

Koponen, Boyer, Ellis, Finkelstein, Lincoln, C. Davis, Carney, Donley, Moyer, Navaar, Ulmer, Gruening, Brown, Sturgelewski, Fahrenkamp, Rodey, Adams, co-sponsor Liberalization of Alaska's Restrictions on Abortion.

I strongly appose their opposition. I not only will never vote for any of these people again because of their stand, but I will strongly campaign against them.

This bill would be:

- . Forcing Doctors to do abortions which violates their hypocrotic oathes. (Making my doctor a murderer)
- . Overstepping my right as a parent to guide, nurture, and protect my minor children from questionable sex education and uninformed consent to abortions without parental notification.
- . Permitting abortion peddlers to do an abortion to minors anywhere, anytime, by anyone with no safety standards.
- . Using my tax dollars to fund abortions, thus, bringing me in as an accomplice to murder - which I refuse to do. (Medicaide is already sending anyone over 24 weeks along to lower 48 for abortions).
- . Taking the preferences of a few and forcing them on the masses, to be funded by the masses.

Sincerely,

Dave Lantz

Alaskans for Life
PO Box 32186
Juneau, AK 99803-2186

April 25, 1991

Representative Pat Carney
Representative Georgianna Lincoln
PO Box V
Juneau, AK 99811

Dear Representatives Carney and Lincoln,

I am writing to you on behalf of Alaskans for Life to voice a strong objection to HB 268.

Our overriding concern is that human life is sacred. To take the life of an innocent child merely for the convenience of its parents or to further their well being, financial or otherwise is a crime against humanity that ultimately degrades the society that sponsors such a policy. When other options exist, why must our State now advocate abortion (the killing of an unborn child) as our preferred alternative? This in itself is reason enough to vote down this bill.

However, if a person accepts the pro-abortion argument, there are other reasons that make this a bad piece of legislation. I will go over them briefly.

Sec. 18.16.020 DECLARATION OF PUBLIC POLICY. "...is a matter of profound personal choice." True enough, but not the entire truth. It is a matter of profound personal choice. But it is also of profound importance to the unborn child who stands in jeopardy of his life. It is of profound importance to the father since genetically, at least, it's half his. (And not all fathers are irresponsible either!) As long as they are willing to assume their responsibility they should have some say in the birth or death of their own children. It's a matter of profound importance to the parents of a pregnant minor daughter. Shouldn't they have some rights in deciding what to do about their child?

Sec. 18.16.030 PROTECTION OF REPRODUCTIVE CHOICE.

1. This section is so sweeping in its scope it is in danger of denying basic freedom of speech and conscience to many in the medical profession. The term "an instrumentality of the State" could conceivably refer to medical facilities receiving State funds, State-licensed medical practitioners, school districts, or elected officials expressing their personal opinions. How far could this be interpreted? Unfortunately, you do not really know.
2. Same section, subsection (c)(1). The use of the term "whether intentional or unintentional" --rather broad a statement I'd say! In fact the whole subsection is rather broad.

3. The use of the term viability and its definition in (c)(4) is useless and misleading. Why bother to mention viability when you can go ahead and abort after it occurs? The phrase "to preserve the woman's life and health" is the standard boilerplate on most permissive abortion legislation. It does nothing to limit abortion and should not be in here. All it does is give false hope to the feeble minded.
4. Mixing contraception and abortion in the same piece of legislation is poor form. They are two very separate issues evoking very different responses. To mix them together leads to a confused response because objection to one issue will probably be confused with objection to the other or both. If you are going to have a contraception bill, have a contraception bill. If you are going to have an abortion bill, have an abortion bill.

Sec. 18.16.100 SHORT TITLE. This should be retitled as "The Abortion-on-Demand Bill."

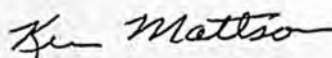
Sec. 3. AS 08.64.326(a) If this is saying what I think it is saying, it says that a hospital or doctor could have a license taken away if they interfere in an abortion "whether intentional or unintentional" (see page 2, lines 12-14 of this bill). The State Medical Board has the power to violate the freedom of speech and conscience of doctors, medical personnel, and even religiously based hospitals such as Providence Hospital if this bill goes into effect. Their choice seems to be to go along with the pro-abortion mentality in spite of deeply held convictions they might have, or suffer "sanctions" the Board "may impose" (page 3, line 3).

Sec. 47.25.197 PAYMENT FOR ABORTIONS. NOT ON YOUR LIFE!!!! YOU CAN USE YOUR OWN MONEY!!!!!! STATE MONEY IS PARTLY MY MONEY AND I REFUSE TO USE MY SHARE TO PAY FOR ABORTION!!!!!! IF YOU'RE SO COMPASSIONATE, DONATE YOUR OWN MONEY!!!!!! Also you will be putting thousands of your own citizens in deep and profound opposition to the State. Pro-life people, such as myself, will have a distrust, disgust and disrespect for any government that so violates our most deeply held convictions. You underestimate the enmity that we can hold toward so evil an organization that takes our money to do deeds we hold to be against our conscience. This certainly is no way to bring a State together.

Why wasn't this bill sent to the Judiciary Committee? Don't you believe in your own system? Why didn't you give more time for review of this bill?

Are you afraid someone might see it? Outside of this, I can't think of one good thing to say about this bill.

Sincerely,



Ken Mattson, President
Alaskans for Life

500,000 members in Alaska }!

Robert
Head

Just ~~was~~ recently ^I read in the latest issue of

Reader's Digest that "Poll after Poll" confirms:

- A) 9 of 10 Americans say they have never doubted the existence of God
- B) 7 of 10 believe in life after death
- C) 8 of 10 believe God still works miracles
- D) 9 of 10 say they pray

Now there are those who maintain that religious teachings or beliefs should play no part in the political process

Be that as it may, whether we like it or not, the very issue being addressed here today is in reality the direct contrast ~~and~~ between two diametrically opposed religions.

Specifically, ^{on one hand} ~~is~~ Traditional Christianity, which few would fail to recognize as a religion, teaching the existence and reality of a living God, the sanctity of human life, and a fixed standard ~~of~~ of ethics and morals, its teachings are bound in two volumes, the Old & New Testament, ~~and~~
~~the~~

the other religion, not as quickly recognized as such, is "humanism" - commonly alluded to as "Secular Humanism." ~~IN~~ ^{IN} place of old & new Testaments, IT'S "Scriptures" are published as "Humanist Manifesto I" (1933) and "Humanist Manifesto II" (1973). This "movement" clearly sets itself up as a religion in its own "Scriptures" as ~~well~~ ^{does} the official publication of the American Humanist Association (titled "The Humanist"). Recognition as an established religion was also noted by the U.S. Supreme Court in 1961 (FOR CASE V. WATKINS).

This religion teaches there is no God, humanity is an accident, life has no meaning nor relevancy beyond the immediate pleasure, and that ethics and morality have no standard, but ~~are~~ ^{instead} are situational, subjective, and transitory. ~~(see the scriptures for the changed teachings)~~

Whether by design or not,

THE CONCEPT OF ~~ABORTION~~ ^{ABORTION ANY TIME FOR}

ANY REASON ~~THE CONCEPT~~ THE ~~ENTIRE~~ ^{here} ~~OF THIS B. H. ARE~~ ^{DISGUISED AS "NON-INTERFERENCE"}

PROMOTING, ~~AND~~ ^{today} IS STRAIGHT OUT OF HUMANIST MANIFESTO II - THE ^{"NEW TESTAMENT"} ~~ANTI-GOD, ANTI-CHRISTIAN~~ ^{AND MUST BE DEFEND.} RELIGION. IT

you have ~~gone~~ ^{gone here} this morning believing this is simply a "liberal"

versus "conservative" political issue - look again. Look REAL close!

There is no choice as to whether a religion's teaching will be supported by your vote on this bill.

The only choice is which religion. Think about it.

If you're one of the 90% who claim to pray - pray about it.

Planned Parenthood of AK
1008 W. Northern Lights Blvd
Anch, AK 99503



Donna Hurdle
7040 Dickerson Drive
Anchorage, AK.

My name is Donna Hurdle; I am the
Exec Director of ~~PPA~~ Planned Parenthood of AK.

On behalf of the staff & board ~~of~~
of Planned Parenthood of Alaska, I
urge the members of the House HESS
committee to pass HB 268, the Reproductive
Privacy Act. We believe that comprehensive
reproductive health care is the right of
every citizen, this includes the right of
a woman to terminate an unwanted
pregnancy. In the years since the
Supreme Court's ratification of ~~Roe~~
v. Wade in 1973, thousands of lives
have been saved through the elimination
of backalley abortions. With the
Webster decision in 1989 allowing states
to regulate abortion, this right is
now in jeopardy. It is crucial that
legislators in the state of Alaska
pass HB 286 to ensure that women
maintain the right to choose an
abortion. Government has no role
in regulating the private medical
decisions of it's citizens. The choice
of medical care is a personal decision
to be made by each ~~that~~ citizen.

(2)

It is equally crucial that Medicaid continue its funding of abortion services. ~~But~~ Poor women should not be prevented from access to the full range of reproductive health, including abortion. Medicaid was established to meet the health needs of indigent citizens, it is unconscionable to prevent ^{a group} Alaskan citizens from access to ~~the~~ medical ~~care~~ care because they do not have sufficient money to pay for it.

Women throughout Alaska will continue to have abortions, whether this medical service is legal or not, ~~this~~ The only question is whether they will have access to safe, legal professional medical care.

Planned Parenthood of Alaska urges you to support HB 286, the Reproductive Privacy Act, ~~HB 286~~ and thanks the sponsors of this bill for their leadership in assuring the fundamental rights of all Alaskan women.

I had
planned to
verbally testify.

HB 268

SUSAN ANSTINE
18644 PUFFIN WAY
AIA 99516
345-2460

My name is Susan Anstine. I have been a Social Worker for 25 years. I strongly urge support and passage of HB 268.

In 1945 my mother was raped by her abortionist before he performed the abortion. She was 6 weeks pregnant. My father had just been killed in the war. My grandfather had just been killed in a hit and run accident.

My mother, a nurse, was the sole support of me, her mother, and her 3 siblings. Had abortion been safe and legal, she would not bear the scars of her difficult choice.

In response to the statement that Alaskans are going to Romania to adopt babies: the reason is blatantly obvious. Those are white babies. The native and black children of this state remain unwanted in most cases after they are born when their parents choose to put them up for adoption. The unwanted Fetal Alcohol

Syndrome babies also remain unadopted.

I respect individuals' rights to believe whatever they choose about the origins of life and the sanctity of life. I do not believe that this is an issue of legislation.

Unwanted pregnancies will not stop. Only safe and legal abortions will.

Rm 519

Teleconference Trouble Report

DATE: 4/25 SITE: Bethel TC #: 91.04.126
TIME OF PROBLEM: 9:15AM PHONE LINE: 543-3572

Describe Problem: *all sites were having trouble hearing Bethel's testifiers (breaking up).*

Action Taken: *Moderator in Juneau & Chairman asked participants to go ahead & FAX testimony (written)*

Did you call your local phone company? Yes ___ No
Did you redial? Yes ___ No Problem resolved? Yes ___ No

Please complete for each teleconference with technical problems. Then fax to Lynn at 465-2864 (Juneau LIO) ASAP. Thanks for your help!



Alaska State Legislature

Please enter into the record my testimony to the (H) HESS
committee name
committee on HB 268, dated April 25, 1991
bill/subject

Pahnem Kingak and myself Cathy Feaster work at the Yukon Kuskokwim Health Corporation Maternal Child Health Women's Center. We support HB 268. Approximately 70% of our women clients in the YK Delta are Medicaid eligible. Abortion services are not available in Bethel, therefore women must travel at least as far as Anchorage. They frequently need assistance with this travel.

Conception is not always a woman's choice. Poor women must have access to the full range of medical services that are available to other Alaskan citizens who have money.

We urge you to support HB 268 and therefore keep all women in Alaska equal.

Signed: C. Feaster ANP
Testifier
MCH / Women's Center
Representing (Optional)
YKDR Hospital Box 3027 Bethel, AK 99559
Address
(907) 543-3685
Phone No.



Alaska Women's Resource Center

111 W. 9th Ave., Suite 4 • Anchorage, Alaska 99501 • (907) 276-0528

House HESS - April 25, 1991 - HB 268/Reproductive Privacy
Testimony by Theda Pittman, Executive Director, AWRC

One of the programs operated by the Alaska Women's Resource Center is a temporary residence for women recovering from alcoholism or substance abuse. For a number of years we have been the only facility in Alaska which not only admitted a pregnant woman but allowed her to stay once the baby was born.

At a recent meeting, the Resource Center Board affirmed a 1989 position paper which supports the need for HB 268:

The Alaska Women's Resource Center believes that the rights to self-determination and to privacy are the cornerstones upon which rest the civil liberties that all Americans cherish. We believe that for women the right of self-determination includes the right to reproductive freedom. This fundamental right of reproductive freedom includes affordable and unrestricted access to, and use of, birth control and contraceptive services, medication, devices and information; good quality prenatal and postnatal care; technology that enhances the opportunities for successful pregnancy; and legal abortion. Whether to bear a child is a profound decision and one that is protected by the fundamental right to privacy. AWRC supports the right of a woman to choose.

And, the Center supports the right of poor women to continue to have access to this treatment through public funds such as Medicaid and General Relief Medical. In states where poor women do not have that option, the public cost and the cost to individual families have proven to be severe:

According to 1989 research by the National Abortion Federation, approximately 3/4 of the women denied Medicaid funding have an abortion anyway, working extra hours or jobs or borrowing from their rent or grocery budgets. Because of the time required to accumulate the money, such abortions often take place as a later stage of pregnancy when there is more risk to the woman.

If the woman carries a pregnancy to term because she is unable to pay for an abortion, she is more likely to experience complications in childbirth and infant mortality, not to mention on-going problems.

None of this means that abortions should be a routine form of birth control, or should be used for gender selection or are desirable on an across the board basis. But, we do seek public policy confirmation that a woman, relying on her own advisers, is the only arbitrator of what happens in her own body. If we can ever stop arguing about that, perhaps we can turn this time and energy to the important work of helping teenagers cope with sexual pressures, sorting out the increasingly complex legal and human complications created by new technology, and taking better care of the children we already have.



TELECOPY COVER SHEET
Anchorage Legislative Information Office
Office - (907) 561-7007 Fax - (907) 562-4376

TO: H Hess Committee

ATTN: _____ FAX: _____ PHONE: _____

FROM: Anna for Leila Wise PHONE: _____

INSTRUCTIONS: TESTIMONY 4/25/91 HHSS

SENT: Date 4/25 Time 405

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 3 (counting cover sheet)

TRANSMITTED BY: [Signature]

Leila Wise

1101 Cordova #229
Anchorage, AK 99501
907/277-1330

April 25, 1991

House HESS Committee
Alaska House of Representatives
PO Box V
Juneau, AK

RE: HESS Hearing on 4/25/91 regarding House Bill 268

Dear Representatives Lincoln and Carney:

Thank you for holding this morning's hearing on House Bill 268. I was disappointed to be unable to testify, but am pleased to be able to write up my comments and send them to you for inclusion in the record.

I believe in the sanctity of human life. I, like the the majority of Alaskans support life, liberty, and the pursuit of happiness -- for all Alaskans. I believe in God and I also believe that God has given me the ability to make choices. House Bill 268 recognizes choices, which is why I support the proposed legislation.

I wholeheartedly support the right and responsibility of an individual woman, with the counsel of her husband or partner, family, friends, clergy, and physician, to make her own decision about whether or when to bear a child. I trust her ability to make her own decisions, no matter how difficult or painful.

Alaska has a longstanding commitment to choice, and Alaskans will vigorously oppose any infringement on our right to choose. We cherish independence and privacy -- and choices. Our respect for reproductive freedom was made evident in 1970 when abortion became safe and legal in this state, three years before Roe v. Wade gave all American women the right to choose. We Alaskans reaffirmed our commitment to choices for all women when we voted in 1982 to continue funding abortions for poor women. That commitment was restated in last year's legislative survey: Alaskans are pro-choice and Alaskans support the use of public funds to pay for abortions for poor women.

I was greatly disturbed by some of this morning's testimony. In particular, I was disheartened by the lack of faith and confidence in women's ability and right to make personal decisions. Some opponents obviously are unaware of the current law and practices or of Alaska's constitutional mandates. This bill simply maintains the status quo, keeping abortion safe, legal, and accessible to all

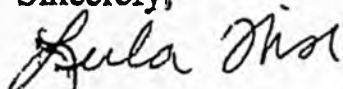
regardless of age or financial status. Others complained about using abortion as birth control and seemed to believe that women can choose to conceive. They're ignoring the technological reality that no method of contraceptive is foolproof. And they're placing the entire responsibility for that failure on the woman.

I can only hope that opposition to this bill comes from misinformation and a lack of education; we can remedy those faults but we can't compensate for a lack of compassion.

I anxiously await the day when contraceptive technology catches up with human need, when every child is a wanted child. Until then, abortion must be safe, legal, and accessible, regardless of age and income.

Please support House Bill 268.

Sincerely,

A handwritten signature in cursive script that reads "Leila Wise".

Leila Wise



Alaska State Legislature

Please enter into the record my testimony to the HESS (Senate & House)
 committee name
 committee on HB 268 / SB 249, dated April 25, 1991.
 bill/subject

Note: As time didn't allow me to submit Katie Hurley's statement, I respectfully request that her attached statement be entered into the record and also submitted to each member of the House and Senate HESS Committees. Thank you,

Signed: Linda Kingkade
 Testifier
Katie Hurley ^{Legislative Chair, Alaska Women's Political Caucus} (Katie Hurley)
 Representing (Optional)
P.O. Box 100804, Anchorage 99510
 Address
272-9164
 Phone No.

STATEMENT OF KATIE HURLEY, LEGISLATIVE CHAIR, ALASKA WOMEN'S POLITICAL CAUCUS:

Madam Chair and members of Senate and House HESS:

I regret that travel plans keep me from making this statement in person.

The Alaska Women's Political Caucus is proud to support the protection of a woman's right to make her own choices about when and if to have children. We also support funding for abortion services for poor women. We support Senate Bill 249 and House Bill 268.

I represent not only our membership--over 300 Alaskans--women and men, but also the hundreds of poor women of our state who will be discriminated against if funds are not available should they decide to have an abortion.

Polls show the majority of Alaskans are pro-choice--we believe in the right of freedom to choose.

I commend to you "No Turning Back", the moving and inspiring story of two committed nuns who had the strength and courage to risk everything they were to stand behind what they believed--women's right to choose.

Their pro-choice position evolved over the years--it was not an easy path. However, they could see no relevance in the opposing arguments to the decisions faced by the actual women they saw at their shelter for the homeless.

And so they decided they were pro-choice and agreed to speak publicly at a rally for choice in Washington, D.C.

On March 9, 1986, before 100,000 other men and women marching that day on behalf of women's lives, Barbara Ferraro (not related to Vice Presidential candidate Geraldine Ferraro) and Patricia Hussey stood on the steps of the Capitol, stepped before the podium's microphones to say:

"Choice is at the heart of conscience, the scriptures and true religious freedom. I stand here today with you...proudly for that which makes us human...choice!"

There may be voices who disagree and that is the democratic way, but we, the Alaska Women's Political Caucus, join with the majority of Alaskans and echo those words--"proudly for that which makes us human...choice!"

TESTIMONY FOR HOUSE BILL 268
TO HOUSE HESS COMMITTEE

MY NAME IS ILEEN SELF. I AM THE PRESIDENT OF THE COALITION OF ALASKANS FOR CHOICE, ANCHORAGE CHAPTER. ON BEHALF OF THE COALITION FOR CHOICE, WE SUPPORT HB 268 IN ITS ENTIRETY AND URGE YOU TO PASS IT OUT OF YOUR COMMITTEE TODAY.

SINCE THE WEBSTER DECISION, WE CAN NO LONGER COUNT ON THE SUPREME COURT TO PROTECT OUR RIGHT TO CHOOSE. THE ABILITY TO KEEP ABORTION SAFE AND LEGAL IS NOW IN THE HANDS OF STATE LEGISLATURES. AMERICANS DO NOT WANT TO WAIT UNTIL WOMEN ARE DYING AGAIN. WE MUST ACT DECISIVELY NOW TO PROTECT OUR PRIVACY IN REPRODUCTIVE CHOICES.

THE ABORTION DEBATE IS NOT ABOUT BABIES. UNWANTED, NEGLECTED BABIES ARE BORN EVERY DAY ONTO THIS OVERPOPULATED PLANET WITH LITTLE HOPE OF CARE OR A DECENT LIFE. THIS IS AN ISSUE OF SELF DETERMINATION FOR WOMEN. AS WOMEN, WE ARE UNIQUELY BORN WITH THE ABILITY TO BEAR CHILDREN. PREGNANCY, CHILDBIRTH AND CHILDREARING IMPACT A WOMAN'S LIFE IN THE MOST PROFOUND WAY POSSIBLE. EACH WOMAN MUST DECIDE WHEN OR WHETHER AT ALL SHE WANTS TO BRING THIS PROFOUND CHANGE INTO HER LIFE. TO DENY A WOMAN CONTROL OF THIS PROCESS IS MISOGYNY OF THE WORST KIND. OUR SELF DETERMINATION AS WOMEN DEPENDS UPON OUR RIGHT TO CONTROL OUR REPRODUCTIVE LIVES.

Ileen Self

Coalition of Alaskans for Choice - Anchorage
PO Box 232 472, Anchorage, AK 99523

Note to Committee members: There were at least 20 people in the room here in Anchorage to testify who did not get the opportunity.

4-25-91

Rep. Lincoln

I have some thoughts to share concerning the abortion issue, I as a woman, find it incredulous that the main involvement of women is - women counseling women to kill women - abliet little women. Women should and do have the right to choose their reproductive behavior, but once a woman enters into and becomes part of an act which produces another human, she is involved with another human, so her rights become qualified by the other human's rights. When the action of those two humans (normally this act is called sexual intercourse) produces an embryo, we now have three humans involved.

Another constitutional right all U.S. citizens have is the freedom to do as we please until that freedom impinges on another person's freedom. Our constitution states that all humans have a right to Life. Back to that third person involved - the young one - the fetus. That fetus has the same right to Life as her mother had at her conception. Remember - around one half of all human conceptions are females.

To enter into aborting baby girls puts women in the position of being the greatest aggressors against their fellow women.

Again it is incredulous that women have entered into a mentality that yells loudly for the right of women to counsel and carry out the act of women killing their younger counter parts - women - the young ones.

Sincerely,
Frances Young
Frances Young

537 Tower Road

Rep Lincoln.

I urge you to vote no on H.B. 268.
I can't imagine our legislature supporting
such an extreme abortion bill; Especially
with out it first being scrutinized by the
judiciary committee. Please vote to follow
the house committee ~~process~~ process.

Thank you.
J Young

CATHOLICS FOR A FREE CHOICE

April 25, 1991

Statement in support of House bill 268, Alaska State Legislature by Mary Jean Collins, Deputy Director, Catholics For A Free Choice

Catholics For A Free Choice is a national educational organization that supports the right to legal reproductive health care, especially to family planning and abortion. CFFC also works to reduce the incidence of abortion and to increase women's choices in childbearing and child-rearing.

We support House bill 268 because it assures women in Alaska the right to make their own moral decisions about their reproductive health care. This bill reserves to the woman, not the state, the right to exercise her individual conscience and follow her own religious convictions.

We are a country of diverse religious views, and on the subject of abortion, there is no consensus among religious bodies about the morality of abortion. This bill insures that the theological views of all religious bodies are respected because no particular view of morality is enshrined in law.

A majority of Catholics in the United States oppose the goal of the Catholic hierarchy to make abortion illegal in nearly all instances. It is important that policy makers hear the voices of other Catholics.

We commend the inclusion in this legislation of funding of abortion services for women who depend on state funds for their health care. Without that provision, a two tier health care system is created: poor women are denied access to care and alternatives that are available to women with private health care plans.

Thank you for the opportunity to express our views.

1436 U Street, N.W., Suite 301, Washington, D.C. 20009-3916, (202) 638-1706 / fax (202) 332-7995

Frances Kissling
President

Patricia Hennessey
Board Chair

Board of Directors

Angela Bonavoglia
Stephen Collins
Mary Gordon
Mary Hunt

Daniel Maguire
Sylvia Marcos
Giles Milhaven
Eileen Moran

Joseph O'Rourke
Rosemary Radford Ruether
Lon Valencia-Greene



Alaska State Legislature

Please enter into the record my testimony to the House HESS
 committee name
 committee on HB 268, dated April 25, 1991
 bill/subject

See Attached (2 pages)

igned: Mary Beth Honn
 Testifier

Representing (Optional)

415 A Verstevia St, Sitka AK 99835
 Address

Phone No.

Mary Beth Huan
415 A Verström St.

99535

April 24, 1991

To: The House Health, Education and Social Services
Committee

I would like to go on record in opposition to
House Bill 208, the "Reproductive Privacy Act."

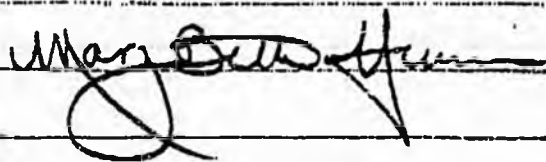
First and foremost, as a registered voter in the
State of Alaska, I do not want tax dollars
to be used to fund abortions. I do not
want public money used to subsidize a
practice I find morally wrong.

I object to all the provisions of this bill,
but the one I find most morally abhorrent
is the following: that this bill would
remove the existing right of a hospital or
doctor to conscientiously object to participate
in an abortion. God has given every human
a conscience and the free will to exercise
that conscience. This provision of the bill is
attempting to legislate morality. In effect, the
'state' will be allowed to dictate it's

beliefs on an individual. This is not
right.

I strongly urge you to vote against
House Bill 268. Thank you for supporting
those who have no voice of their
own - the unborn children.

Thank you,
MaryBeth Aun





Alaska State Legislature

Please enter into the record my testimony to the HHESS
 committee name
 committee on HB 268, dated April 25, 1991
 bill/subject

Please See Attached Testimony

Signed: _____
 Testifier Rhonda Coiaie
 Representing (Optional) _____
 Address _____
 Phone No. _____

Please fax to:

The House, Health, Ed. and Soc. Serv. Comm.

Rep. Ben Grussendorf

Gov. Hickel.

Rep. Leman.

Dear Sirs,

This is my testimony that I am opposed to House bill #268.

I am not only against abortion in the first place, but to use tax dollars for abortions is not using common sense. Using tax dollars to feed all the hungry and homeless people in the world today is using our common sense and making sure our elders are being taken care of is using common sense.

The thought of this bill, if passed, may allow anyone to do abortions makes my stomach turn because the results may be even worse than taking an innocent babies life, it may end in taking a woman's life or even a baby's life if you allow teenagers to have abortions with out parental consent.

I have two daughters (young) but when they become sexually active I pray there isn't a law

allowing them to terminate a pregnancy whenever and where ever they want to.

It's up to us to form the future. So lets not abort the possibilities of a GREAT FUTURE!
God Bless!

Thonda Conine
614 Merrill Street
Sitka, Alaska
99835
907-747-5102



Alaska State Legislature

Please enter into the record my testimony to the HESS
 committee name
 committee on HB 268, dated April 25, 1991
 bill/subject

SEE ATTACHED WRITTEN TESTIMONY

Signed: Mary J. McNally
 Testifier

Representing (Optional)
608 Sawmill Creek Road, Sitka, AK 99835
 Address
747-5851
 Phone No.

Thank you for the opportunity to provide you with this written testimony on HB 268.

I would like to address some of the specific issues raised in HB 268.

Section 18.16.030(a)(1): I object to the word "continue";

Section 18.16.030(a)(2): I object to the vagueness of the term: "to preserve the woman's . . . health." Who is to determine when her "health is affected to the point an abortion is necessary?"

Section 18.16.030(b): I object to the concept that the state should not "interfere" with an abortion, but rather should be doing all that is within its power to protect that life.

Section 18.16.030(c)(1): This section limits the rights of free speech and freedom to assemble--I vehemently object to this provision.

Section 18.16.030(c)(2): This provision, though obviously intended to replace AS 08.64.105, falls dangerously short of the purpose of that statute. I think you are opening the way for non-medically safe abortions to be done with both women and their preborn children.

Section 18.16.030(c)(3): I disagree that pregnancy begins at implantation in the uterus--it begins at conception. Why, if it must be implanted in the uterus do they call one that has implanted in the fallopian tube a "tubal pregnancy"? Life begins when the egg and sperm unit and the cells begin their division process. All medical science knows this fact.

Section 18.16.030(c)(4): "Viability" is a vague and arbitrary term really only necessary to those who believe that is when life really begins!

Section 18.16.040(1): I believe the life of the preborn child must also be protected, not just the life of the mother.

Section 18.16.040(2): The state must be concerned with the interests of all, and because both the mother and child should have equal rights, the state must err on the side of the one who has the most at stake--clearly the child, because an abortion always results in death.

Section 18.16.040(3): Yes, regulations should be consistent with established medical practice, but this

should remain under the State Medical Board.

Section 18.16.040(4): Health and Social Services should not be in the business of promoting abortions but should be neutral in their approach. They should be affording women all possible options available.

AS 09.65.100(a): Removing "Except as Prohibited Under AS 18.16.010(a)(3)" is only a technicality to allow abortions to be allowed on minors under the age of 18 years of age to have abortions without parental consent. I believe the we must maintain that parental notification provision in our statutes.

Finally, with regard to Sec. 5. AS 47.07(a) and (b), and Sec. 6. AS 47.24.197, I object to any state monies being used to perform abortions. It is one thing to allow them to be done but it is another to have them paid for out of public monies when so many people are so drastically opposed to abortions being performed at all.

Thank you for the opportunity to express my views on this extremely important issue. I am asking you to please not pass this legislation out of the Health, Education and Social Services Committee today.

Mary Jo McNally

To Whom It May Concern:

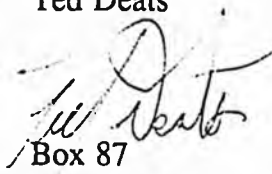
Regarding HB 268

I am opposed to HB 268. It discriminates against unborn Alaskans and strips them of their civil rights including the right to live. They deserve equal protection under the law regardless of their state or class.

Their state is unborn; their class is helpless.

Please stop this bill.

Ted Deats



Box 87

Juneau, Alaska 99802

Dear Ms. Lmooch,

My wife and I want to testify
before the HESS committee on this
bill. We signed up yesterday - it's only
fair we be heard.

Thank,



I am opposed to House Bill 268 - strongly opposed.

I object to the way this bill sets abortion on the drug store shelves right alongside contraceptives. Abortion and contraception exist at totally opposite poles. Contraceptives are used to prevent a pregnancy - abortion is used for just one purpose: to terminate a pregnancy.

The question of viability outside the womb is mute - there are thousands of people living and working in the world today, who could not or cannot survive without some degree of artificial aid. I challenge you to tell them that their lives are not 'viable' and/or that they have no say in whether they live or not.

I also don't believe that doctors or the medical profession have the right nor do they need the extra burden and/or responsibility of making the recommendation on viability. This bill also removes the right of any member of the medical profession to object to participating in an abortion. It is my understanding that the doctor's creed requires him or her to preserve life - not to terminate it.

The payment of abortions through Medicaid is a gross mismanagement of money intended for health care: what a negative way of using tax monies. It would seem much more intelligent to channel the monies into programs (or create programs) which promote a better life for the mother and encourage her to keep her child.

In this era of conservation, recycling, etc., why is it that our own off-spring are the only resource we are willing and eager to destroy.

Please - I ask you not to support House Bill 268. Thank you,

Emma Marie Deats, Box 87, Juneau, Alaska 99802
Phone: 463-3262



Alaska State Legislature

Please enter into the record my testimony to the H. H.E.S.S.
committee name

committee on HB 2685, dated April 25 1991
^{bill/subject}
Reproductive Privacy Act 8am-10am

Please See Attached
Testimony

Signed: Francis Hallgren
Testifier

Representing (Optional)
Box 1803, Sitka, AK 99835
Address
747-6909
Phone No.

WRITTEN TESTIMONY CONCERNING SB 249 and HB 268

"Woman's Right To Choose Abortion"

My name is Frances Hallgren. I am a resident of Sitka, Alaska; a homemaker, mother and businesswoman. My address is Box 1203 Sitka, AK 99835; my phone number is 747-6909.

I would speak in opposition to SB249 and HB268. I noticed in reading these bills that the current parental notice law would be entirely repealed. As a mother of two youngsters, I am particularly upset at this. I am sure you have already heard many of the arguments, however, I will relay my concerns to you. As it is, parents must sign numerous papers each and every time one of our children might need an aspirin (or Sucret or whatever minor pain medication might be warranted). How can we let minor children get an abortion without any parental notice whatsoever.

I would also speak to the fact that children are by definition immature and of need of special protection and instruction. To give an immature child complete personal freedom to terminate a life without even notifying the parents makes a mockery of the true women's rights which have been so painfully gained over the years. I presume that any 14-year old who demands an abortion behind her parent's back would also be qualified under these bills for 100% funding regardless of her parents assets. Is this good public policy? Does it make fiscal sense? Does it make for responsible citizens?

As I read these bills I find them harsh and extreme. I resent having any of my tax dollars used in this manner. And I will certainly refuse my personal monies or energies to support any legislator who would vote to pass either of these bills.

Another matter, too, is that House Bill 268 seems to be going only to HESS and Finance. Should this not (according to the rules) also be going to Judiciary as the Senate Bill is?

Frances Hallgren

4-24-91

4-24-91

Re: House Bill # 268
Health, Education + Social Services, Finance

Dear Committee Members,

I would like to voice my extreme opposition to House Bill No. 268.

Not only do I believe that the state should not condone abortion, but I think we will be in the position of actually promoting abortion by using state funds to pay for abortion services.

The Reproductive Choice amendment S.C. 18.16.030 is so loosely written that it could be interpreted in the future in such a way that I wouldn't be allowed by the state to "interfere with" (by counseling in the school, by protesting at a clinic, or other activities) a woman's personal choice to abort her child.

The entire bill, including A.S. 09.65.100 2A does not strengthen the family, but undermines the rights and responsibilities of parents. It states clearly that, only in the event of a parent willing to allow an abortion, is the parent allowed

Post-It™ brand fax transmittal no. 10 7671 # of pages 3	
To	H E S S Comm. Hrs. From Bernice Sharnbroich
Co.	Pa. t
Dept.	
Phone #	766-287/66-2321
Fax #	165-2652

far!

I believe that your standard for when a child can be aborted needs to be examined. The description of what is "viable" leaves to some professional the decision of whether there is a "reasonable likelihood of sustaining survival... outside the uterine uterus, with or without artificial aid."

There is a dangerous area here, which could leap right into the euthanasia issue. Who is the "professional" who decides life or death here? We cannot ignore the fact that this is a life and death issue. By stating that this is a "profound personal decision," the fact that remains unstated, is that an individual, a unique person with heart beat and potential is being killed. The other unstated fact is that the state of Alaska will not protect the child, but will give consent to the mother to kill at her convenience if she wishes.

Another issue I am very upset with, is that the HESS Committee has held a teleconference from Sam on a workday. When I called & talked with Pat Borgman she said that the only way I could get my views to the committee is to get a letter.

matter, I can't believe that this standing committee would be unwilling to hold a teleconference later in the evening or on the weekend. It's obvious that many of us are working and cannot get to a teleconference during the work day. This is the most important piece of legislation ever to be presented. It should have a fair hearing from the people.

Thank you for your thoughtful and serious consideration of this issue. Please vote against its passage.

Bonnie Sharnbach

Box 306

Ukiah, AK 99827

Please get this in the committee information file as you promised. Thank you - your FAX has not been working - has not rung or was busy -

April 24, 1991

RECEIVED
APR 29 PM.

• TRAVIS KING
• 7520 ROVENNA
• ANCHORAGE AK
• 99518
• Representative Lincoln
• P.O. Box V
• Juneau Alaska 99811

Dear Legislator,

Subject: House Bill No. 268 or any other proposed compromising legislation aimed at revising tough abortion regulations such as SB 249 or 170 or 174.

Koponen, Boyer, Ellis, Finkelstein, Lincoln, C. Davis, Carney, Donley, Moyer, Navaar, Ulmer, Gruening, Brown, Sturgelewski, Fahrenkamp, Rodey, Adams, co-sponsor Liberalization of Alaska's Restrictions on Abortion.

I strongly appose their opposition. I not only will never vote for any of these people again because of their stand, but I will strongly campaign against them.

This bill would be:

- Forcing Doctors to do abortions which violates their hypocritical oaths. (Making my doctor a murderer)
- Overstepping my right as a parent to guide, nurture, and protect my minor children from questionable sex education and uninformed consent to abortions without parental notification.
- Permitting abortion peddlers to do an abortion to minors anywhere, anytime, by anyone with no safety standards.
- Using my tax dollars to fund abortions, thus, bringing me in as an accomplice to murder - which I refuse to do. (Medicaid is already sending anyone over 24 weeks along to lower 48 for abortions).
- Taking the preferences of a few and forcing them on the masses, to be funded by the masses.

Sincerely,

Travis King



planned parenthood of alaska®

RECEIVED
APR 29 P.M.

April 24, 1991

Representative Georgeanna Lincoln
Alaska State House of Representatives
P. O. Box V
Juneau, Alaska 99811

Dear Representative Lincoln,

Planned Parenthood of Alaska wholeheartedly endorses CSHB 268, the Reproductive Privacy Act. The Planned Parenthood Federation of America, of which we are a member affiliate, has taken a strong position of advocacy to ensure that abortion remains a legal option for those women who may choose it. This fundamental right that American women have counted upon since the passage of Roe v. Wade in 1973, has been eroded since the Webster decision allowed states to enact legislation regarding abortion. We believe that the choice of abortion as a medical procedure is a profoundly personal decision. Reproductive health care should not be a matter of governmental policy, no more than any other form of medical care.

Planned Parenthood of Alaska supports the Reproductive Privacy Act and will actively work to ensure its passage. We commend you for initiating this effort to ensure the availability of reproductive care to all Alaskan women, including poor women who rely on medicaid to finance their medical care.

Sincerely,

Donna E. Hurdle, MSW
Executive Director



1008 West Northern Lights Blvd. • Anchorage, Alaska 99503 • (907) 561-8970

A United Way Agency

Testimony Before House Health, Education and Social Services
by Laury Roberts Scandling
April 25, 1991
(not delivered orally due to lack of time)

My name is Laury Roberts Scandling. I am a fulltime student and homemaker in Juneau. I was born and raised in Alaska and am the mother of twins. I am speaking for myself as a consumer of several reproductive choices, including motherhood, and, perhaps, I am speaking for the women you won't hear from: the Alaskan woman who does not have a voice in this process nor the resources to deal with a crisis pregnancy.

I do not think there is anything new that one can say either in support or in opposition to measures assuring reproductive privacy. Abortion is a fundamental issue that tears at the conscience of each of us, regardless of our position. Our beliefs are held dearly, as well they should be.

As a woman and mother, I respect, understand and sympathize with individuals who oppose abortion, for whatever reason. I just happen to believe that they should not be able to make that choice for everyone.

Nonetheless, this measure is not about permitting abortion, access to which was upheld by the U.S. Supreme Court 18 years ago. Nor is it about choosing where our tax dollars go. It is about ensuring that the will of some will not penalize others for socioeconomic or other reasons.

I am reminded of a story I uncovered about ten years ago when I was a reporter. An administrator in the state's benefits division unilaterally and secretly removed abortion as a covered health insurance option for state employees. Once his action became public the attorney general ordered that the benefit be reinstated.

This story illustrates what I find most frightening about this bill: that it must be considered at all, that one man believes so strongly in his vision of the world that he will use political means to impose that vision upon everyone.

Contrary to an oft-heard declaration, the people of Alaska have **not** delivered a mandate. Two-thirds of the votes cast last November were for gubernatorial candidates who favored choice.

So, when the clamor becomes deafening, keep this in mind: Alaskans do not want government making the most personal of choices for them.

I find it ironic that an administration elected on platform of independence from government doesn't heed it when it comes to controlling reproductive choice.

I would like to close by thanking the many cosponsors, particularly the Republicans, for standing up on this issue. While I believe reconsideration must be given to the section on parental consent, the bill rightly codifies important public policy.

TO: All cosponsors

Rep. Lincoln: I appreciated your dignified manner of conducting the hearing.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
 committee on HB268/ABORTION, dated 4/24/91
bill/subject

STATE MONIES SHOULD NOT BE USED TO
 TAKE A HUMAN LIFE.

ABORTION STOPS A BEATING HEART.

IT MAY BE LEGAL AT THIS POINT IN TIME,
 BUT IT IS NOT ETHICAL.

WE NEED "ETHICS" IN OUR GOVERNMENT !

Signed: Shirley A Phillips
Testifier

myself

Representing (Optional)

Box 1800 Sitka, AK 99835

Address

(907) 747-6256

Phone No.



Alaska State Legislature

House bill 268

Please enter into the record my testimony to the H HESS
committee name

committee on HB 268, dated April 25th 1991
bill/subject 8 AM T.C.

I miscarried several times and I am very much aware that a fetus is a true human being.

Since this is scientific fact the state should be in the business of protecting the most vulnerable of our people.

Let's not assume that the poor among us are poor parents - many great men started in humble homes.

I am afraid we would lose our most caring of nurses since many of them will not consent to participating in abortions.

This most violent act against our own should not be made an easy thing to do.

Signed:

Barbara Kay Baird
Testifier

Representing (Optional)

11 Finn Alley, Sitka, Alaska 99835

Address

907-747-3593

Phone No.

H.E.S.S. Hearing

My Testimony on HB #268

We save the whales, we save the seals, we save the spotted owls, we save the sea lions - Can we in good conscience due less to save human babies? If not, then who will fight to save the wildlife which seems so important in future generations?

Our forefathers who wrote the Constitution, the Declaration, and the Bill of Rights wrote about every human's "right to life, liberty and the pursuit of happiness." Notice please, "the right to life" comes first! Our forebears must be spinning flips in their graves at the insanity of this proposal and those others like it, already passed by our "honorable" representatives!

Rep Ulmer mails out propaganda about "Families First" and then helps sponsor a bill that will do more to destroy families and our Country's social fabric than any other single action short of mass genocide. This is an unconscionable absurdity!

I for one, want to go on record as stating that Rep Ulmer and her cohorts do not represent me or my best interests in this matter. This bill in particular and others like it, is a flagrant insult and slap

in the face to parents and particularly
fathers of children, as I am. You talk
about child abuse - what is more abusive
than taking a child's life from them?

We condemned Adolf Hitler for the
slaughter of innocents, then we pass a bill
28 yrs later which allows us to do the same
with the full consent of the law! AND, on
our money we print "In God we trust".
This surely is an enigma, a paradox
and hypocritical to me! It is a sign
of the sickness of our society and an
indication of the lack of ethics and moral
behavior accepted now, as "normal".

Surely adoption of unwanted babies for
thousands of couples who want them, can't
have them, and are on mile-long waiting
lists is a more humane and compassionate
alternative than abortion!

If we go to great lengths and extremes
to save animals, can we not put forth as
much effort to save the most highly developed
animal on earth - unborn human babies?

How many Mozarts, Einsteins, Edisons,
Wright Brothers, Mother Theresa's, Clara Barton's,
Marie Curie's, Bernstein's, Picasso's, Willy Mays's,
Jackie Robinson's, Caruso's and Red Granges
have been eliminated, without a chance, from

a world that so desperately needs their skills and talents?

I do not support state or Fed monies being used for funding abortions, I look upon this whole idea as another way for some gov't agencies to control and manipulate the population of this Country by systematically eradicating babies of the poor, the underprivileged and minority peoples.

If individual citizens chose to commit abortion on themselves, that is between them and their God. But they should pay their own bills; It was their choice that got them into this predicament in the first place — not the Governments! Let each person be responsible for the consequences of their own actions as is currently the policy under Criminal and Civil Law.

It would seem far better for those involved to use the free birth control and contraceptive clinics available to the general Public. "An ounce of prevention is worth a pound of cure"

This bill if passed would eliminate the need for licensed Drs, hospitals and approved facilities and by so doing would have us regress to policies of the past in which these services were performed in back alleys. Surely we have become more civilized and cosmopolitan than that!

Taking the right of a Dr or Hospital to
conscientiously object to performing this
"Cruelty deed" is a travesty of Civil Rights
and "Due Process".

How can the State of Alaska Callously
disregard restrictions imposed on these practices
by the US Supreme Court and the Fed Gov't?

I support preventative education,
both sides (pro-con) counseling, parental
notification and Contraception (birth control)
information and devices. But I draw the
line on Abortion. I am incensed at this
proposal and cannot object to it too
strenuously! I'm "agin" it!

Terence W Kelly Jr.
3333 howell ave. - apt # 207
Juneau, Alaska 99801
April 25, 1991

To Whom It May Concern:

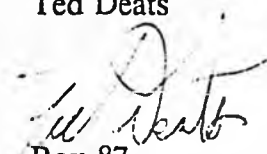
Regarding HB 268

I am opposed to HB 268. It discriminates against unborn Alaskans and strips them of their civil rights including the right to live. They deserve equal protection under the law regardless of their state or class.

Their state is unborn; their class is helpless.

Please stop this bill.

Ted Deats


Box 87

Juneau, Alaska 99802

4/26/91

Dear Rep. Carney,
Please Reschedule a hearing before the HESS committee. My wife and I waited 2 hours yesterday after signing up. It's only fair that we and others be heard.

Thanks,
Ted

HC 60 Box 306T
Copper Center, AK 99573
April 24, 1991

Representatives Pat Carney & Georgianna Lincoln
Co-Chairmen
Health, Education & Social Services Committee
Alaska House of Representatives
P.O. Box V
Juneau, AK 99811

RECEIVED
APR 26 P.M.

Re: House Bill 268
For the Record

Dear Representatives Carney & Lincoln:

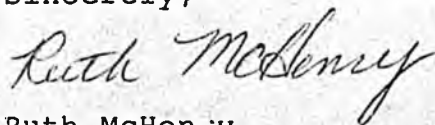
I have read HB 268, relating to abortion and birth control rights, and I thank you for co-sponsoring it.

This is not simply a "women's rights" bill. The father's future is often at stake, too. If the mother is denied an abortion, the father may have to drop out of high school or college and go to work to support her and the child.

There is a high social cost as well: Parents who are less-well-equipped to provide for themselves and their families; children who are unwanted; more tax money being spent for Medicaid, Aid to Families with Dependent Children, Head Start and other programs that assist the disadvantaged.

Finally, there is the "big picture". Alaska, though it has a relatively small population, is part of an overpopulated world. Each child born, an especially every American child born, will consume resources and add to the problems of pollution. Therefore, let us help to ensure that every child born is a wanted child. House Bill 268 can help to do that; I encourage its passage.

Sincerely,



Ruth McHenry

TO: The Hon. Georgiana Lincoln and Pat Carney, Co-Chairs of
the House Committee on Health and Social Services

FROM: Alma Seward, Executive Board Member, ASEA/AFSCME Local 52

DATE: April 25, 1991

SUBJECT: House Bill 268, Reproductive Rights

I would like to begin by thanking the House HESS Committee Chairpersons and members for this opportunity to provide testimony on House Bill 268, dealing with reproductive rights.

This is an important bill to the Alaska State Employees Association because, in our opinion, it speaks to one of the most basic freedoms guaranteed under the U.S. Bill of Rights, the Freedom of Choice.

ASEA is a strong supporter of individual liberty and privacy and opposes governmental intrusion that invades personal privacy and physical integrity. Under the American form of democracy, which guarantees freedom of religion, we believe each person has the right to follow the dictates of his or her conscience, and to act in accordance with his or her own religious beliefs.

ASEA is and will continue to be a staunch advocate of equality for women. Furthermore, we believe that true equality cannot be achieved if women do not have the right to make the ultimate decision in all matters affecting their physical health.

The rights of women upheld in the Supreme Court in Roe vs. Wade have been endangered by other court cases and by state legislative initiatives. We believe that House Bill 268, introduced by Rep. Niilo Koponen, seeks to legislatively establish and protect those rights, most prominently Freedom of Choice, for all Alaska women.

Under this bill, those who support or oppose abortion are free to choose, according to the dictates of their individual consciences. For this and the reasons stated above, we strongly urge this committee and the members of the Alaska Legislature to approve House Bill 268. To do so, we believe, would merely reaffirm the Legislature's commitment to our nation's Bill of Rights and to the individual's Freedom of Choice.

ASEA's House HESS Committee Testimony

On H.B. 268, page two

In closing, I would like to add that ASEA's testimony today also reflects the views of our international union, the 1.2 million member American Federation of State, County and Municipal Employees, as reflected in a resolution adopted at AFSCME's June 1990 annual convention. Further, it is our hope that the committee will opt to make this testimony part of its permanent record on House Bill 268. Thank you.

(end testimony)



**ALASKA STATE
EMPLOYEES ASSOCIATION**
AFSCME Local 52, AFL-CIO

BILL KELDER

Political Action Coordinator

Court Plaza Building
240 Main Street, Suite 702
Juneau, Alaska 99801



(907) 463-4949
FAX (907)463-4950
TOLL FREE 1-800-478-0049
HOTLINE 463-4977



Alaska State Legislature

Please enter into the record my testimony to the HHESS
 committee name
 committee on SB 249 - HB 268, dated 4/25/91
 bill/subject

*Please See Attached
 Testimony*

Signed: Perce Hillgren
 Testifier

Representing (Optional)
Box 1203 SITKA

Address
747-6909

Phone No.

WRITTEN TESTIMONY CONCERNING SB 249 and HB 268

"Woman's Right To Choose Abortion"

My name is Peter S. Hallgren. I am a resident of Sitka, Alaska; a member of the City and Borough Municipal Assembly; and an attorney. My address is Box 1203 Sitka, AK 99836; my phone number is 747-6909.

I would speak in opposition to SB249 and HB268. The question of abortion has unfortunately become highly politicized in Alaska. The League of Women Voters made it a Municipal Election issue in Sitka's October local election and I was forced to state my feelings on the matter.

In a nutshell, I find abortion to be a civil rights issue of the highest magnitude. Since I believe that an unborn child becomes a citizen long before "viability". I believe that each unborn child therefore has all of the civil rights of any Alaskan. I understand that many people choose to believe that an unborn child has no civil rights, and therefore only choose to look at the rights of the pregnant woman.

It bothers me considerably to think that in this day and age a person can be robbed of their civil rights merely because you choose to label them sub-human or non-persons, much in the same way that blacks were considered a century ago. In our enlightened age of increasing awareness of personal worth, it seems particularly ingenuous to abandon the moral high road and adopt a statutory policy of discrimination against a defenseless segment of our society.

Certainly pregnant women have the same civil rights as the child that they are carrying, and I have great compassion for a woman with an unwanted pregnancy; as much compassion as I have for their child. Since their rights are equal, the only way to settle the issue is to balance their competing interests and potential harm to each. The potential harm to the mother varies all the way from potential death down to simple inconvenience. The potential harm to the child is always certain death.

By enacting a statute that gives the power of deciding the question of whose rights are more important directly to the mother, you would be mandating self-interest of the most blatant sort as the sole judge of the child's rights.

Blacks, Natives, women and others have advanced the struggle for civil rights over many years. To now roll back the tide of civil rights through such mean-spirited legislation is not worthy of an enlightened society.

Peter Hallgren

Peter S. Hallgren; April 24, 1991



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
committee on Bill # 268, dated 4/25/91
bill/subject

Please See Attached

Signed: Susan Jensen
Testifier

Representing (Optional)

Box 464, Sitka, AK 99835
Address

747-5454
Phone No.

Box 464

Sitka, Alaska 99835

April 25, 1991

House Health, Education & Social Services Committee
House of Representatives
P.O. Box V
Juneau, Alaska 99811

Dear Committee Members,

Thank you for the opportunity to comment on House Bill #268.

I want to go on record as being opposed to this bill. The State of Alaska should act as an agent to protect, and not destroy life. Passage of this bill will encourage the death of even more unborn children. The state should certainly not be in the business of funding abortions.

Additionally, the provision in this bill to allow girls under the age of 18 to have abortions without parental notification is absurd! Many of these same girls couldn't get an aspirin without the consent of their parents if they were asking for one from a school nurse. Consider the absurdity of this.

Please do not pass this bill. Choose for the unborn babies.

Sincerely,
Susan Jensen



Alaska State Legislature

Please enter into the record my testimony to the H. H. E. S. S.
 committee name
 committee on HB 268, dated 4-25-91
 bill/subject

I strongly object to this bill and do not support it on the State of Alaska's funding of abortions. It is beyond my understanding how a State or nation can condone these murderous proposals. Child abuse is illegal and this bill supporting abortion is the highest and most offensive crime of abuse to our children

Signed: Gery Stumacher
 Testifier

Representing (Optional)
1310 Edgcombe Drive
 Address
747-8704
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H. H.E.S.S.
committee name

committee on HB 268, dated 4-25-91
bill/subject

It is ludicrous to hear that once again the state is willing to foot the bill. If a woman wants an abortion she should be responsible for both her actions as well as the expense. What about the rights of the nurse or physician to refuse to perform an abortion on a moral basis. This bill belongs back in the ~~waste~~ waste-basket it was dug out of. I do not support this bill or anything about it. Do us all a favor and ~~abandon~~ abandon this bill.

Signed: [Signature]
 Testifier

Representing (Optional)
102 Rahovec Ct.
 Address
747-1497
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H. H. E. S. S.
 committee name
 committee on HB 268, dated 4-25-91
 bill/subject

After reading HB 268 I cannot find reason to support this bill. I have never supported state funded abortions and never will. Even though there are other points of health ~~concern~~ concerns involved in this bill these only cover up the real intentions behind this legislation. The abortion issue involved in this bill makes it impossible for me to support HB 268 due to its pro-abortion stance. As a valid tax payer, I do not wish to see our state money or any other public funds go to support abortions in any way shape or form.

Signed: Dan Schauwecker
 Testifier

Representing (Optional)
1310 Edgemoor Dr
 Address
747-8704
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H E S S
committee name
 committee on H B 268, dated 4-25-91
bill/subject

I am strongly opposed to this bill, the elimination of requiring doctors or surgeons, hospital and licensed facilities, parental notification and any waiting periods will certainly reduce quality of care. I would also resent any of my tax monies being spent on abortions.

Signed: Carolyn O'Neil
 Testifier

Representing (Optional)
2414 W.R. , Delta
 Address


542-6232
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H HESS
 committee name
 committee on HB 268, dated April 25, 1991
 bill/subject

see attached testimony

Signed: 
 Testifier

Representing (Optional)

712 Monastery Street Sitka Ak 99835
 Address

907-747-6769
 Phone No.

4-25-91

Honorable members of the committee.


For many years scientists have tried to define life and also tried to create it. I want to encourage you, the members of this committee, to go ~~to~~ to the high school and college text books on biology of 25 and 30 years ago and read those definitions.

The genes and chromosomes determine what a life form is. That is if the genes are those of a mouse, it will never be a fish. From the time sperm and ovum unite the outcome is determined. When a human male sperm unites with a human ovum the result is a human life form, a human being. It can never be a cat, dog, whale or canary.

Fancy modern terminology does not change the fact that at the time of conception, a human being is conceived. Terminating the life of that human being kills it. Killing a human being is wrong.

Please, do not allow a law to be passed that makes doing wrong legal.

Respectfully submitted

W. 

Wolfgang Corduan



Alaska State Legislature

Please enter into the record my testimony to the H.H.E.S.S.
committee name

committee on HB 268, dated April 25, 1991.
bill/subject

See attached testimony

Signed: *Gwynne Corduan*
Testifier

Representing (Optional)
712 Monastery Street, Sitka, Alaska 99835
Address
~~SIT~~ (907) 747-6769
Phone No.

April 25, 1991

Honorable Members of the Committee;

How does one console a mother who has murdered her own child?

The laws of this nation would surely punish such a person.

Yet, this same nation is entertaining and passing laws which make that very crime legal. Abortion is wrong, and legalizing it does not make it right.

Who will help those women who were forced by family, friends, and society to exercise their "free choice" to have an abortion? "Free choice" is not a solution to a problem. Each abortion results in at least two victims - one murdered and the other sentenced to unending emotional suffering.

Please vote against House Bill #268, the "Reproductive Privacy Act".

- 02 Sincerely,

Juneau Coalition for Pro-Choice
P.O. Box 021325
Juneau, Alaska 99802

House Committee on Health, Education and Social Services
State Capitol Building
Juneau, Alaska

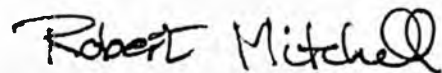
Dear House H.E.S.S. Members,

On behalf of the over 350 members of the Juneau Coalition for Pro-Choice, we urge you to support H.B. 268. The right of access to choice of birth control and to legal abortion must be maintained for all Alaskan women, regardless of their economic status. The life of a woman is inexorably connected to the type of birth control available to her, and to legal abortion. This right cannot be denied to any woman.

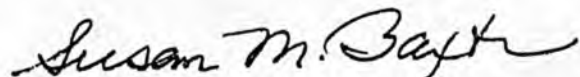
By voting to support this bill, you are making a strong commitment to equality among women in Alaska. We believe that two standards of choice and medical care based on income are not acceptable to the people of Alaska. We strongly agree with the bill's purpose to prevent governmental interference with both the right of all individuals to use birth control and the right to choose childbirth or to obtain a safe and legal abortion.

Thank you for allowing us to testify in this matter.

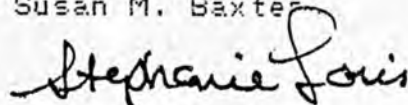
Sincerely,



Robert Mitchell



Susan M. Baxter



Stephanie Loris

TELECOPY COVER SHEET

Fairbanks Legislative Information Office

Office - (907) 452-4448

Fax - (907) 456-3346

TO: House HESS Comm. FAX: _____ PHONE: 465-3759

FROM: FBX LIO PHONE: _____

INSTRUCTIONS: Please forward this written
testimony on HB 248 & HB 268: TC
held on 4/25/91 @ 8:00 A.M.

RECEIVED: Date _____ Time _____

SENT: Date 4-25-91 Time 5:12 P.M.

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 2 (Not counting cover sheet)

SENT BY: Mike



Alaska State Legislature

Please enter into the record my testimony to the Health, Education & Social Services, F.
committee name.

committee on H. B. 248, dated 4/25/91
bill/subject

I am in favor of the medical assistance program covering alternate health care as well or in lieu of or included in (9) clinic services OR ELSEWHERE. (I believe Medicaide or Medicare should provide services to eligible recipients whether they choose to go to a medical doctor (MD), or alternate health care provider such as NATUROPATH OR HOMEOPATH.) Until such time as the federal government is convinced that the recipient has the right to choose whole person (holistic), non-toxic, health care so his body can heal its self, Alaskans should lead the way in this area. My aged friends who get ill should be able to use their own choice of healer and save the tax payer some cash along the way. At this time those on public assistance with Medicare or Medicaide have not this option.

This is a real need.

Thank you.

Signed:

D. A. (Dorothy) Mc Silvary
Testifier

myself, as 30year Alaskan, Educator, Mother of seven, believer in
Representing (Optional) ALTERNATE HEALTH CARE.

504 Monroe St., Fairbanks, Alaska 99701
Address

(427) 456-4875, 452-6929
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Health, Education & Social Services, F
committee name.

Infanticide
committee on H. B. 268 Limitless , dated 4/25/91

bill/subject

I concur with the logical, well thought out and researched testimony against H. B. 268. It is a very poor attempt on the part of society to take care of problems at the result end instead of approaching solutions at the cause of the problems. We were all taught that two wrongs don't make a right. We were all taught that the end does not justify the means. We were all taught that our nation was founded on the rights of LIFE, LIBERTY AND THE PURSUIT OF HAPPINESS. Our nation is singularly (in history) championing the "RIGHTS" of the wrongdoers and neglecting the victims on every front. We must suspend consideration of all aspects of the legality of murdering unborn babies. We must, then get on to the business of contemplating WHAT IS WRONG WITH OUR SOCIETY, CONSIDER THE REAL CAUSES OF ITS ILL HEALTH AND GET TO THE TASK OF REKNITTING THE MORAL FIBERS WHICH ARE BEING STRAINED AND BROKEN WHICH ONCE PERMEATED OUR CULTURE.

We need to shore up what is left of our moral undergirdings and make our lives secure before, during and in the latter stages of our human lives on earth.

This bill, in addition to all the wonderful testimony this morning, would help in the rapid decline of our lives as we now know them.

Freedom without self discipline, privilege without responsibility, instant gratification without self discipline, responsibility or contemplation.... these are symptoms of ills in our society.

Let's see how we differ in the year 1991 from 1900 to 1950! Let's reverse the trend, at least in Alaska, and begin putting our very culture back on track. The family has always been the basic unity of society. Ponder correction of the cause of the ills and stop bandaiding the symptoms.

For the forces of evil to rule the world, all it takes is enough men, GOOD MEN, to do nothing. I think a GRASS ROOTS MOVEMENT IS EMINENT. Let's define sensorship to enhance that which we are exposing everybody to in media, art, education, our homes knowing that we ARE, BELIEVE, ACT OUT what we see and hear. Our youth NEED OUR GOOD EXAMPLE. KILL H.B. 268. CRISIS PREGNANCY OUTPOSTS EXIST IN FOUR ALASKAN CITIES providing care & necessities

Signed:

Testifier Bartholomew (B.A.) McElwain

Thank you.

Self, husband, 7 children, Possibly 1000s of unborn babies and childless couples throughout Alaska & USA

Representing (Optional)

504 Monroe St. Fairbanks, Alaska 99701

Address

(907) 456-4875, 452-6929

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H HESS
committee name

committee on HB 268, dated April 25, 1991
bill/subject

I am a single parent of four children & am below poverty level.

I am totally opposed to House Bill # 268.

The way in which this bill has been handled as a rush job and kept under wraps both surprises and offends me.

I don't like the way the words contraception and abortion are used in a side-by-side and interchangeable manner. Abortion is the murder of unborn children and should never be thought of as birth control.

It never fails to amaze me the way abortion is spoken of as though it were some kind of privilege!

Signed: _____
Testifier *Julie LaDuke*

Representing (Optional) *See Signature*

Address *on Page 2*

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H HESS
committee name

committee on HB 268, dated April 25, 1991
bill/subject

I cannot believe anyone would want a bill which states its ok. to kill their baby, their grand-baby, or their neighbor's baby. Every child from every ethnic and economical background should have the right to be born once conceived. A teenager's baby is just as precious as a married couple's baby. A teen with an unwanted pregnancy can both give life to her baby & give the baby up for adoption freeing her to go on with her life.

The constitutional rights of Health Care Givers is blatantly threatened by HB 268. Patients seeking health care lose their freedom also. I for one would not want my family to go to a health care facility that aborted children. I urge this committee to give another hearing because of the seriousness of this bill.

Signed: Juianne LaLue
Testifier

Unborn Children
Representing (Optional)

111 Finn Alley / Sitka, AK 99835
Address

(907) 747-3593
Phone No.

RM 579



Alaska State Legislature

Please enter into the record my testimony to the Health, Education and Social Services
 committee name
 committee on HB 268 Reproductive Privacy Act dated April 25, 1991
 bill/subject

This bill is unconstitutional. Under the guise of protecting some women's rights it totally undermines the rights of parents and especially the undefined rights of children in the womb. Also not addressed are the rights of the fathers of these children. Please protect everyone's constitutional rights and vote against this bill. Thank you.

Signed: Alice M. Cameron
 Testifier

Representing (Optional)
435 VERSTOVIA AVE. SITKA AK 99835
 Address
747-5453
 Phone No.

10F1



Alaska State Legislature

Please enter into the record my testimony to the H.H.E.S.S.
committee name
 committee on HB 268, dated 4-25-91
bill/subject

I cannot in any way shape or form support this bill that provides for the legal killing of innocent life... the unborn child in their mother's womb. I object morally, emotionally and spiritually to this heinous act. It is beyond my comprehension how a nation founded... under God with freedom and justice for all, can condone such a murderous proposal in our country. This is the worst form of child abuse, denying the fundamental right-to-life of the tiny individual for the simple convenience of a form of birth control.

Signed: Sherrri Schauder
Testifier

Representing (Optional)
1310 Edgumbe Drive
Address
747-8704
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Hess
 committee name
 committee on HB #268 , dated 4/25/91
 bill/subject

*Please see attached typed
 statement.*

Signed: Vera Zaboyshe
 Testifier

Representing (Optional)
3488 HPR-A

Address
907 - 7474984

Phone No.

My name is Vera Zaborske and I'm a registered nurse and am representing Nurses For Life; a pro-life action/ support group made up of health care workers in Sitka, Ak.

I'm presently employed at Sitka Community Hospital where I have made my feelings on abortion known to the administrator, the hospital board, and the D.O.N. I believe that abortion is the taking of a life, and it is against my moral and religious beliefs, and therefore I will not participate in any way in the procedure of abortion. The Alaska Statute section 1816010-4b, "Nothing in this section requires a hospital or person to participate in an abortion, nor is a hospital or person liable for refusing to participate in an abortion under this section." This protected my rights as a citizen, enabling me to not participate in an act which is against my beliefs.

With the changes proposed in House Bill # 268, this right would be taken away (repealed) and there would be no protection for my choice. The other changes in this bill would also repeal sections addressing who can do abortions; where they can be done; parental consent issues; residential issues. These all will effect the safety factor in abortions.

Myself and the health care workers I represent; would like to see all elective abortions outlawed; But since this is not the issue before us at the present time; at least let us preserve our right to refuse participation in an act which we consider to be the taking of a life and against our beliefs.

Please do not pass house bill # 268.

Thank you for your time

Vera Ellen Zaborske
4-25-91



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
 committee on HB 268, dated 4/25/91
bill/subject

As a parent, I have much invested in my children. The government does not have the right to perform a potentially dangerous medical procedure on ~~me~~ ^{my} minor child without my consent. This bill attempts to say on ^{page 4} line 25 that the parent or guardian is not liable to pay for this abortion service on their minor child. Yet if I pay taxes & pay for this "service". Will the state assume responsibility for any and all expenses that may result as a complication of this abortion? For example will the state pay for treatment of Post Abortive Stress?

I am against HB 268.

Signed: Jessie Karen
Testifier
a parent
Representing (Optional)
431 Verstopia Ave Sitka AK 99835
Address
907-747-8251
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
 committee on HB 268, dated 4-25-91
bill/subject

Abortion is wrong! Our government should not support the killing of the unborn. This is not a matter of privacy its a matter of life and death. This bill would allow abortions with no restrictions. I urge your opposition to this bill. It is extremely liberal with great consequences that will affect our state for years to come.

Our state should be looking

Signed: Shirley Demmett
Testifier

self
Representing (Optional)

316 Wortman Loop Sitka
Address

907-747-3196
Phone No.

for ways to help women in crisis pregnancies with money, housing, education - adoption should be another great focus of our legislature. Let's focus on life. A life is a terrible thing to waste.

Shirley Demment
cont.



Alaska State Legislature

Please enter into the record my testimony to the HESS
 committee name
 committee on HB # 268, dated 4/25/91
 bill/subject

As a nurse, Alaskan parent, and Catholic I oppose HB#268 on the grounds that life is not a choice, but a gift. Abuse of the freedom of choice is oppression.
 As a Nurse, we are to respect and defend human life. If you were to remove my right to refuse to participate in abortions, I would stop nursing.

As an Alaskan parent, and myself an adopted infant, I believe teens who are in crisis pregnancy need the advice and support of their parents. To solve this social problem by murder is ludicrous. Government approved abortions has led to an increase in ^{abuse of} poverty and neglect because it eroded respect for life and family values.

As a Catholic (and I say that because I have freedom of speech, choice + religion) I ask you to respect my belief that all life is sacred. When a politician decides who is to live and who is to die, they are defying the laws of God and nature. The killing of an innocent child is NOT natural.

HB#268 abuses freedom of choice and spells blatant oppression. The child is oppressed to death, the killers are oppressed, and the 1.5 million couples waiting to adopt in the U.S. are oppressed. This bill makes me depressed.

Signed: Mary S. Soltis
 Testifier

unborn children of Sitka

Representing (Optional)

615 DeGroff

Address

907 747-5624

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name

committee on HB 268 - Reproductive, dated 4-25-91

We fully support ^{bill/subject Freedom} ~~HB 268~~. Sitka's for Choice has over 500 members. Women have always used abortion as a means of fertility control. Unless women can decide whether and when to have children, it is difficult for them to control their lives or participate fully in society. Legal safe and affordable abortions help us to give them that control. Women will have abortions, whether legal or illegal, whether safe or unsafe.

A lifetime of suffering is too much to demand for any woman's expression of her sexuality. Even if contraception is obtainable, no fertile woman is ever safe from the possibility of unintended pregnancy, since there is no method that is 100% reliable. Even abstinence has its failures since rape exists.

For many women abortion is a positive choice. Having an abortion can be much less traumatic physically and emotionally than having an unwanted child.

Most young mothers have little knowledge of rights. They are accustomed to following the advice of authority figures and are easy prey to those who arrange adoptions. The loss of a child to adoption is a unique kind of unnatural one. Pregnancy should not be a punishment!

Signed: Ruth E. McKenzie Ruth E. McKenzie

Testifier

Sitka's For Choice

Representing (Optional)

Box 2966

Address

747-8950, 747-6819

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HESS committee name

committee on Reproductive Privacy, dated April 25, 1991.

bill/subject

My name is Jennette Chavez, I am a mother of a three year old, a wife and a businesswoman. I urge your support in this bill because I feel that the state should not interfere in issues as private as the prevention, continuance or termination of pregnancy. The issue of abortion is a very complex one and the political arena should not be a place where moral judgments are made and imposed on families of diverse beliefs and convictions. Like many people who support freedom and privacy in reproductive issues, I do not see abortion as an answer to unwanted pregnancies, but rather a necessary alternative to those unfortunate families who find themselves, for varying reasons, faced with the possibility of having to terminate a pregnancy. The imposition of restrictive laws in matters of reproduction have chilling effects. At this moment, millions in Panama, where reproductive decisions were delegated to the government and families were forced to have unwanted children, babies - children are being sold for money. They have become a commodity on the open market. Mercenary flock there by the thousands, why, if there are so many children here needing adoption? Adoption and abortion are not the answer, education in family planning will help. Save the number of unwanted pregnancies. Choice is our right.

Signed: Jennette Chavez
Testifier

Representing (Optional)
Box 2722, Sitka, AK 99835
Address
747 6127
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
committee on HB 268, dated April 25, 1991
bill/subject

I'm against House Bill #268.
Tax payers shouldn't have to
pay for abortions. The state isn't
helping to pay my medical bills.

The state requires parent
signatures for the schools to
administer an aspirin but
wants to take away parental
consent to kill a life. That is
wrong. Where is your conscience.

Please reconsider and vote
no for this bill. Our tax dollars
should be used to save lives.

Mrs. Swanson

Signed: Mrs Swanson
Testifier

Representing (Optional)

PO BOX 2982 SITKA, AK. 99835

Address

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name

committee on HB 268, dated April 25, 1991

I am Against House Bill # 268.
I do not want TAX Payers Paying
For Abortions. The STATE does
not pay for my medical Bill nor
should do so.

It is wrong when The STATE re-
quires parent signatures to Ad-
minister An abortion To Their child
but wants To Take away Parental
Consent To Kill a Life.

Where is our rights, our chance To
Take The baby into The family and
our chance To Adopt The baby if
The case necessitates?

Please use your conscience and
Vote no on our request.

Signed: .

Ronald C. Swanson

Representing (Optional)

Address

P.O. Box 2982 Sitka, AK 99835

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House H.E.S.S.
Reproductive committee name
 committee on HB 268 Privacy Act, dated April 25, 8 AM.
 bill/subject

House Bill #268.

I am against abortion and therefore
 do not approve ^{the} use of state funds
 to provide for elective abortions.

Signed: Lucille V. Barbridge
 Testifier

Representing (Optional)
110 Babst Circle
 Address Sitka, AK 99835

Phone No. 747-5312

TELECOPY COVER SHEET

Ketchikan Legislative Information Office

Office - (907) 225-9875

Fax - (907) 225-8548

TO: House HESS FAX: 465-2869 PHONE: _____

FROM: Ketchikan 208 PHONE: 225-9675

INSTRUCTIONS: testimony on HB 268

RECEIVED: Date _____ Time _____

SENT: Date 4/25/91 Time 9:25

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 4 (Not counting cover sheet)

SENT BY: [Signature]



Alaska State Legislature

Please enter into the record my testimony to the House HESS committee name

committee on ABORTION FUNDING #268, dated 4-25-91 bill/subject

I believe by cutting funding for abortion we will in effect be forcing poor women to bear children they can not or will not care for, only to justify the religious views of a very vocal minority. I demand seperation of church and state. The state has no business between the advice of a medical professional and the conscience of any female. I personally do not believe that you can kill a human spirit, the body is merely a vessel. That aborted spirit will choose another vessel.

Signed: MEREDITH MARSHALL
Testifier

self
Representing (Optional)

PO Box 7418 Ketchikan AK
Address

225-3877
Phone No.

0



Alaska State Legislature

Please enter into the record my testimony to the HESS
committee name
committee on HB 268, dated 4-25-91
bill/subject

I am a certified nurse-midwife and advanced nurse practitioner. I support HB 268. The bottom line is that abortion is an age old dilemma that will be selected by women in desperate situations. Modern society has the ability to offer a safe medical procedure.

HB 268 by guaranteeing poor women's accessibility to health care through Medicaid funding attempts to ease class barriers to health care. The State of Alaska should pass this legislation to protect basic rights of women: equal accessibility to health care

Signed: _____

Marta Poore
Testifier

Representing (Optional)

P. O. Box 9396 Ketchikan AK

Address

247-8103

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House HESS
committee name
committee on HB #268, dated 4/25/91
bill/subject

in the nation
We in Alaska have the highest rate of alcohol abuse
& possibly also of sexual assault + child sexual abuse
Children are at risk in this state. Programs to protect
them are being cut at a time when the number of
children in need is rapidly growing. It is
irresponsible to bring more children into the
world when we are failing to take care of
those who are already here. Both the children
and society at large suffer the consequences
when overburdened and/or unprepared parents
have no way to avoid birthing children they
can't care for. The technology of contraception
is inadequate: 50% of abortions are due to
contraceptive failure. The right to choose abortion →

Signed: Carolyn J. Dixon
Testifier

Representing (Optional)

846 Warren Ketchikan

Address

225-2044

Phone No.

is a necessary back-up until such time as scientists develop absolutely reliable contraceptive methods. In the case of people too careless or irresponsible to use contraception, we need to consider - do we want to continue to allow children to be born to careless & irresponsible parents so that we send men through our prison system as they begin to show the scars of such parenting?

Another thing I'd like to ~~point~~ point out with some bitterness and anger is that if women attempted to practice the abstinence often preached to us, there would be a dramatic increase in the rate of rape & family violence in the state.

Thank you.

TELECOPY COVER SHEET

Ketchikan Legislative Information Office

Office - (907) 225-9676

Fax - (907) 225-8546

TO: House HESS FAX: 907-225-8546 PHONE: _____

FROM: Ketchikan LED PHONE: 225-9676

INSTRUCTIONS: Testimony on HB 268

RECEIVED: Date _____ Time _____

SENT: Date 4/25/91 Time 10:50am

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 10 (Not counting cover sheet)

SENT BY: [Signature]



Alaska State Legislature

Please enter into the record my testimony to the House committee name

committee on House Bill 268 , dated 4/10/91
bill/subject

*I am very much opposed to this bill.
I feel that it would only make every thing
worse for even those it is supposed to help.*

Signed: Clarence Denny
Testifier

Representing (Optional)
Box 1004 World Center, Rte. 99928
Address

225 4363
Phone No.

①



Alaska State Legislature

Please enter into the record my testimony to the HESS
 committee name
 committee on HB No. 268, dated 4-25-91
 bill/subject

Reduced to its simplest and most objective terms this bill and present State policy condones or permits the killing of unborn children unless the mother's doctor determines that the child is viable outside the mother's uterus. What is viable? Is a person on life support systems viable? It seems that the determination should be based on whether the child is living, not whether or not it's viable.

We do not believe the killing of unborn children should be condoned or permitted much less encouraged as does this bill and present state policy. We believe abortion should be far more restricted.

Signed: A Fred and Judith Miller
 Testifier

Representing (Optional)

637 Main

Address

225-5540, 225-6666

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the All that are concerned

committee name

With Bill- HB 268

committee on

bill/subject

, dated

4/25/91

I oppose as a registered
District One voter HB 268.
SB 249. I don't want State
dollars to be used as funding
for abortions to low-income
women for any reason &
on demand nor do I want
abortion promoted as an
alternative type of birth control.

Signed:

Mrs. Janice D. Jared

Testifier

District One voter - mother of two

Representing (Optional)

1428 Fairy Chason, Ketchikan, AK 99901

Address

907-247-9824

Phone No.





Alaska State Legislature

Please enter into the record my testimony to the House bill 268, Senate 249
committee name

committee on House Bill 268, dated 4/10/91
bill/subject

Pro abortion activists talk about "choice as the essence of freedom." I suggest that Responsibility is the essence of choice.

Some people feel that abortion is a fundamental right, The same as freedom of the press and freedom of speech. Abortion is not a freedom to choose, but rather is a way to ~~to~~ avoid responsibility for previously made choices.

We talk about pregnancy as if it were something that comes to an objective bystander, like a cold or the flu, and as if the only cure to this innocently-gotten ill is abortion.

The choices a woman makes that would even allow her to become pregnant are made many times and in several ways before conception occurs. Pregnancy is something that happens only with a good deal of effort and under a definite set of active circumstances which could be modified or avoided altogether.

Abortion is being used as a convenient way to undo something somebody has specifically and most of the time willingly taken the effort to do.

I believe that abortion is seriously unjustified and morally wrong. I further feel that public money should ~~not~~ be used ^{instead} to fund abortions. A woman who will not get public money for abortions ~~she~~ ^{she} should ^{instead} get public money to assist with prenatal care and child birth, as well as ^{with} contraception.

I urge you to vote against House Bill 268.

Signed: Beth Wright
Testifier

Beth Wright & Kerry Wright
Representing (Optional)

2201 Baranof # 202, Ketchikan Ak 99901
Address

225-8034
Phone No.

Testimony of: Kirk M. Thomas
STG Box 1312
Ketchikan, Alaska 99901
(907) 225-3665

Given on: April 25, 1991 during a hearing at the legislative affairs office in Ketchikan Alaska regarding House Bill # 268.

Good Morning, My name is Kirk Thomas. I am a resident of Ketchikan and have owned and operated businesses here for the past 18 years. I am also the President of the Ketchikan District of "The Church of Jesus Christ of Latter Day Saints" with 761 members in Ketchikan, Petersburg, Wrangell, Metlakatla, and Prince of Wales Island. It is in this capacity that I address you this morning.

The Church of Jesus Christ of Latter Day Saints considers abortion to be one of the most revolting and sinful practices of this day and any member of the church who submits to, is a party to, or performs an abortion is subject to church discipline except in cases where the pregnancy resulted from rape or incest or the life of the mother would be severely threatened if the pregnancy were to continue.

The church is a recognized leader in the world in promoting family life and free agency. It also teaches us as members to be actively involved in our communities and to see that good men and women are elected and supported in public office.

I am here to express our opposition to House Bill No. 268. This bill as written professes to provide for a woman's right to choose abortion without governmental interference. If there is to be no governmental interference, there should also be no governmental promotion of, or participation in the performance of an abortion. HB No. 268 clearly brings the government into a participatory role where it has no business being.

State funding of "on demand" abortions is an unacceptable cure to a serious social ill in our society. Funds being misdirected by our legislators for this purpose will only serve to deprive the vast majority of the population of quality education and other basic services which are legitimately provided by the government.

Because of the far reaching legal implications of this bill (evidenced by current problems in other states) we strongly encourage the involvement of the Judiciary Committee prior to this bill being debated in the State House.

We recognize the complexities involved in the issue of abortion but want the record to show that our membership will be strongly encouraged NOT to support any public official who introduces, co-sponsors, or supports any legislation that will involve state funding or other participation in this most abominable practice.

THANK YOU

5



Alaska State Legislature

Please enter into the record my testimony to the H.E.S.S.
committee name

committee on HB 268, dated 4-25-91
bill/subject

I am strongly opposed to this bill. It removes the conscientious clause from existing legislation, which totally ignores a doctor's right to choose to refuse to perform a medical procedure he deems immoral; and removes the parental involvement requirement which, tho unenforced, is a valid part of law. Even if amendments are added to correct the two weaknesses, the bill still shouldn't be passed, because while legislating non-intervention by government, it mandates state government intervention to pay for a medical procedure which is entirely optional, not necessary. Our state must not continue to support the abortion industry. I'll end by saying that ~~God~~ Himself, who has placed each of you in your current position of coser

Signed: Janet Johns
Testifier

Representing (Optional)
PO Box 7962, Ketchikan, AK 99901
Address
225-3872
Phone No.



Public Testimony
Health Education & Social Services Comm.
HB 268

Women in Alaska already have the right to abortion, their right to use birth control is unquestioned, abortion is already covered by Medicare, therefore HB268 is unnecessary.

As the mother of three young girls I am concerned that this bill advocates Abortion with only the Consent of the Minor.

My consent is required for my girls to attend school field trips, to play sports, the school cannot even give them an aspirin without my consent, yet this bill would allow surgery without it.

This is outrageous and extreme governmental intervention in our private lives.

I believe Abortion is a sensitive, traumatic experience. It is not a "women's right" that should be championed.

Lonna Fagan
49 Double Eagle Ln. ST6.
Ketchikan, AK 99901
225-8657



Alaska State Legislature

pg 1

Please enter into the record my testimony to the Hess committee name

committee on 268 , dated 04/25/91 bill/subject

Women have been choosing to terminate unwanted preg. since hunting & gathering times. In those societies when a woman knew there would not be enough food for the group & found herself preg. she would engage in heavy labor or took herbs to induce a spontaneous abortion. The choice to terminate unwanted preg. for emotional or economic reasons has been made by women probably since the beginning of time. Today however if abortion is legal but has no funding it will be only available to middle-high income, if it is illegal it still will be available only to middle-high income women & women will be at risk. Black market abortions will fill our jails / children raised in poverty will cost more than medical funding if one is approaching this from a budget position.

You cannot legislate when a woman will or will not reproduce. Reproduction is a personal choice based on ones own moral values. Funding of this medical procedure should not be created based on values made into law therefor combining church & state.

The passing of this bill will ensure that all women regardless of age or economic status have choice when faced with a problem that only can be solved by more effective birth control methods & a progressive health ed. program in our schools & homes.

You do not know what you would do until you've walked a mile in the other persons shoes. If any of you on this committee found yourself with an unwanted preg. & were less fortunate economically than you are, struggling to keep for on the table for yourself & additional

Signed: _____ Testifier. CRAT pg 2-

Representing (Optional)

Address

Phone No.

(8)



Alaska State Legislature

152

Please enter into the record my testimony to the Hess
committee name

committee on 268, dated 04/25/91
bill/subject

CHILDREN YOU MAY HAVE, HAVE FEW JOB SKILLS & EMOTIONALLY UNABLE TO COPE WITH A CHILD OR ANOTHER CHILD. WOULDNT YOU WANT A CHOICE?

I AM THE MOTHER OF THREE CHILDREN, ALL THREE BY CHOICE, I AM ALSO CATHOLIC & IT IS FROM THIS PERSPECTIVE I SUPPORT HB 268. CHURCH & STATE MUST REMAIN SEPERATE.

THE ALTERNATIVES TO THIS BILL ARE DEVASTATING & DEGRADING TO WOMEN & FAMILIES.

Thank You
J. Henry

Signed: Jeanne R. Henry
Testifier
Ketchikan Womens Network
Representing (Optional)
1039 Dunbar
Address
225-2428
Phone No.

9

House Bill 208, Senate Bill 249

Dated 4/10/91

I am opposed to using public funds for abortions. I am also strongly opposed to abortion for moral reasons.

4/25/91

Kerry Wright

574-54-2625

3201 Baranof # 202

Ketchikan, AK 99901

225-8034

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Ketchikan Legislative Information Office

Office - (907) 225-9675

Fax - (907) 225-3548

TO: (H) HESS Committee Members FAX: 465-2864 PHONE: _____

FROM: Ktn LIO PHONE: _____

INSTRUCTIONS: Written Testimony (T/c # 91-04-126) on HB268

RECEIVED: Date _____ Time _____

SENT: Date 4-25-91 Time 12:35PM

DISPOSAL OF ORIGINAL: Discard Hold for Pickup

NUMBER OF PAGES: 4 (Not counting cover sheet)

SENT BY: Rae



Alaska State Legislature

Please enter into the record my testimony to the H. Hess
committee name

committee on Legal Bill H.R. 268, dated 4-25-91
bill/subject

I oppose this bill! It is not
in the interest of Alaskans now or
present.

Do not confuse abortion with birth control.

The murder of innocent people should not be
accepted. We should be above the species
that kill their young.

Becky Snygg

Signed: Rebecca Rose Berrall
Testifier

Representing (Optional)

R.O. Box 5216 Ketchikan AK 99901
Address

247-5581
Phone No.

Testimony to the House H/SS Comm

April 25, 1991

RE: H.B. 268

Dear Legislators:

As co-chairperson of Coalition of Alaskans for Choice/Ketchikan, I am submitting testimony that a large segment of concerned citizens in Ketchikan feel the laws of Alaska regarding reproductive choice must be safeguarded. H.B. 268 would serve such purpose.

The current administration has overtly announced its non-support of the right to obtain a legal abortion; further, it intends to interfere with this right by severely limiting the ability of women, especially those who are without financial means, from obtaining a legal abortion. Historically the State of Alaska has provided payment for medical services including therapeutic/elective abortions for persons eligible for such assistance.

The Coalition in Ketchikan, which consists of over 200 current members, will support and work to ensure that reproductive choice suffers no further erosion of rights under Alaskan law. The Coalition strongly urges your continued support for H.B. 268. Thank you for your time and efforts to listen to the concerns of our citizens throughout the State.

Respectfully,

Carmen Nantez

Carmen Nantez
Co-chairperson
Coalition of Alaskans for Choice/Ketchikan
P.O. Box 9021
Ketchikan, AK 99901



Alaska State Legislature

Please enter into the record my testimony to the House H/55 Comm.
 committee name
 committee on HB 268 , dated 4-25-91
 bill/subject

My name is Elinore Jacobson. I am a retired
 Women's Health Care Specialist. I urge
 legislative support of HB 268.

My testimony includes that gained from
 professional experience and my stats
 are from the Alan Guttmacher Institute
 New York and from Catholics for Free Choice
 Washington D.C.

at the time of my practice due to the
 barring of federal of federal funding for
 abortions there was an increase in use
 of state funds for abortion.

Some individuals don't want tax money
 used for abortion when in fact we all

Signed: Elinore Jacobson
 Testifier

Private Citizen
 Representing (Optional)

2125 Second Avenue Ketchikan
 Address

225-3395
 Phone No.

must support some government spending we don't like. Pacifists support the military and Christian Scientists pay their share of medical programs. 61% of all terminations are done on women under the age of 25. Some negative consequences of this are seen in high school dropout rates, increased pregnancy risks to women and resultant problems to newborns and their ongoing cost of care. It is also difficult for families to break out of a cycle of dependency in poverty & welfare thus limiting future educational opportunity. As a grandmother of a 14 year old pregnant teen said "We can't afford to feed another child"

For every dollar spent to pay for termination for poor women \$4.00 is saved in public medical and welfare expenditures. With legal abortions there is an 11 to 13 times less risk than with pregnancy continuance which is a safety factor to consider.

I am aware following my participation in Alaska for Choice and as a member of Catholics for Free Choice there will be anti choice members testifying before your committee. Personhood is a religious belief and life or ensoulment theologies vary widely. Catholics believe ensoulment/life begins at conception, Judaism believes it begins at birth and ensoulment life varies widely in Protestant religions.

In a pluralistic society not every religious belief religiously derived conviction can or should be connected into public law. This violates our right of separation of church and state.

The American Nurses Association has issued a position statement recognizing access to health care as a basic human right. Lack of care is especially detrimental to those most vulnerable in society namely women and minorities. In closing may I urge passage of HB 268 ensuring reproductive freedom for all Alaska women.

Marilyn E. Evans, Executive Director, 4-25-91



Alaska State Legislature

Please enter into the record my testimony to the House Health, Education & Social Services ^{2/5}
 committee name
 committee on HB 268 - Reproductive Privacy Act dated APRIL 25, 1991
 bill/subject

I STRONGLY SUPPORT HB 268 IN
its entirety. !!

Signed: Cathy Kim Wilson
 Testifier

 Representing (Optional)
Box 2038

 Address
487-2379

 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House H.E.S.S. Committee
 committee name
 committee on HB268- Reproductive Privacy
ACT, dated 4-25-91
 bill/subject

I feel a woman has the right to decide what she wants to do with her body, therefore I am for this H.B. 268. It is up to the individual, and no one else, please pass this bill.
 Thank you

Signed: Peggy J Smith
 Testifier

Representing (Optional)
Box 1863
 Address
907-487-2395
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House H.E.S.S.
 committee name
 committee on HB 268 - ^{Reproductive} ~~Privacy~~ Act, dated 4/25/91
 bill/subject

I am opposed to this bill and I urge you to kill this bill in its entirety. I believe this bill robs me of my rights to raise and assist my daughter in all areas of her life. It sounds to me like the intent of this bill is to remove more of the consequences of sexual promiscuity and encourage her to feel free to be sexually active even at the ages of 14 or 15.

The argument to have only wanted babies assumes the ability to predict the future. How do I know who will love that child 2 yrs from now?

I have purposely asked literally hundreds of people over the years if they wish they had been aborted. I have not yet met even one person who has said they wished they had been aborted. Apparently we have accurately judged who would not live and none who would not want to live have slipped by the abortionist and into life.

My own mother has said if abortion would have been legal she would have had my sister killed. They are now just friends and both are glad she is alive. How do you know your baby will be wanted when you get to know them?

The right to life is far and above ~~the~~ ^{more} valuable than the right to choose.
 Please give more time to amount publicly before you vote!!!

Signed: Michael B. Green
 Testifier

Representing (Optional)
SR 11020 Kodiak, AK, 99615
 Address
(907) 487-2468
 Phone No.



TELECOPY COVER SHEET

Kodiak Legislative Information Office

Office - (907) 488-8116

Fax - (907) 488-5284

TO: Juneau Information Office

ATTN: _____ FAX: _____ PHONE: _____

FROM: KODIAK L.I.O. PHONE: _____

INSTRUCTIONS: Written Testimony for t/c # 91-04-126

SENT: Date _____ Time 4-25-91

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 2 (NOT counting cover sheet)

TRANSMITTED BY: [Signature]

FSYNC



Alaska State Legislature

Please enter into the record my testimony to the House H 55
 committee name
 committee on HB 285 HCS, dated 4/25/91
 bill/subject

This bill is objectionable not only for the specifics of its language but also for its intent and the pro-abortion mentality is based. By repealing AS 18.60.010, hospitals and individuals who oppose abortion on demand on moral grounds and feel they cannot participate in or provide assistance to the abortionist would lose all protection from liability. As the law stands now, no hospital or individual has to help the abortions kill babies nor can be held liable for refusing to violate the most deep felt sincere convictions. Why do you want to force people and hospitals to chose between the threat of litigation or possible loss of employment and participation in what, to them, is a murder? Why do you want to force pro-life hospitals, nurse, and doctors to join in such horrible deads?

It is especially appalling that you want to keep parents in the dark when it comes to their minor daughter facing dangerous surgery that could leave her sterilized, paralyzed or dead. I'd like to cite the case of 13 year old Dawn Ravenell who died as a result of an abortion at the Eastern's Women Center in Manhattan in 1985. She was 21 weeks pregnant when her baby was aborted and her parents never even knew she was pregnant until the hospital called to say she was in a coma. The parents have since received a \$1 million plus judgement for negligent death from the abortion mill. Your bill would allow such things to occur here. Our children can't go on a field trip to the fire station or even get an aspirin without notification of the parents yet you want to keep parents in the dark when the life of their daughter and grandchild is on the line. How can you be for such nonsense? You should amend the parental permission bill to make it acceptable to the federal constitution as the state of Minnesota has done. When their law was in effect, there was a 37% decrease in teen pregnancy from 1981-1986.

(1 of 2)

Signed: Kenneth D. Reppand
 Testifier

Representing (Optional)
1616 Selief Lane
 Address
486-6592
 Phone No.

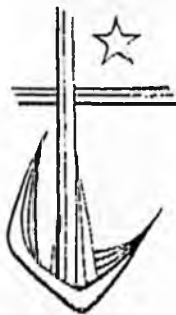
(292)

As long as I have mentioned the danger of so-called safe and legal abortions, I'd like to speak on the case of Susanne Logan who is currently almost completely paralyzed as a result of a "safe" abortion at the Hillview Women's Medical Surgical Center in Maryland. The CBS 60 Minutes program aired an investigation of the place just last week and it was truly appalling. Perhaps the worse aspect was that this clinic is still in operation because Maryland has recently adopted the same sort of legislation as this bill purposes. They have no effective laws on the conduct of abortion clinics. The requirement of this bill that the Dept. of HHS adopt no regulation that increases the cost or availability of abortion means that not even the most reasonable or achievable regulation is possible. Ms Logan was paralyzed because no antidote for her anesthesia was in the clinic and the resuscitation equipment was broken. Simple requirements such as this should be in practice but could not be under HB286 since that would increase cost. Rather make abortion safer, this bill makes it more dangerous.

On a broader view of this issue, I'd like for you to think back to about 140 or 150 years ago when a practice as evil as abortion was in our land, the enslavement of black African-americans. The logic of the slaveowner and the abortionist is amazingly parallel. Slave owners claimed a right to private property just like the abortion supporters claim a right of private choice, the unborn and black people have both been referred to as something less than fully human under the law, under the Fugitive Slave Act each person and political entity, no matter if they where anti- or pro-slavery were required not to interfere with the slave owners rights but actually had to cooperate with authorities in the return of escaped slaves. This bill is the reincarnation of the Fugitive Slave Act because like slavery abortion is based on a racist view of a certain portion of our population. You can not embrace the language or intent of this bill without embracing a racist view of the unborn child.

On listening to the tele-conference of this bill, I noticed one thing its supporters have in common. They have all had the chance to be born. Choice on any issue only has value if the one most affected has the opportunity to choose.

Kenn D Reppert



ARCHDIOCESE of ANCHORAGE

225 CORDOVA STREET • ANCHORAGE, ALASKA 99501
907/258-7898 • FAX: 907/279-3885

Office of the Archbishop

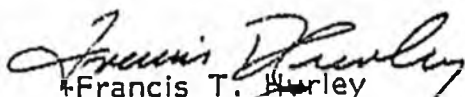
April 25, 1991

Representative Lincoln

The two disconnects at Anchorage made it impossible for me to wait longer to testify during today's teleconference on House Bill 268.

I submit my written testimony and will send a more lengthy critique of the bill later.

This is not a bill that should be rushed through the legislature.


Francis T. Hurley
Archbishop of Anchorage

Testimony

House Committee on Health, Education and Social Services
April 25, 1991

My name is Francis T. Hurley. I am the Catholic Archbishop of Anchorage, a position I have held for 16 of my 21 years in Alaska.

I express my appreciation to you for the opportunity to address you on the proposed bill pertaining to abortion, HB 268.

My personal position against abortion as a citizen and as Archbishop is known to those who have read the various articles I have had printed in our local papers. I need not retravel that ground here.

Today I make two points.

The first is my critique of HB 268, I offer a few observations here about it. A written more extensive critique will be sent later. The second point pertains to what appears to me to be for legislators an irresponsible approach to an extremely volatile issue on which citizens of this state are deeply divided.

Briefly on the bill! If this bill were to pass through the legislature and be made the law of the state, it would be the most extreme in the United States, going far beyond Roe - Wade. It would jettison parental consent, the conscience clause that protects hospitals, even the very limited restrictions of Roe - Wade. It would be abortion on demand for any reason whatsoever. It would wipe out the rights of many other people, let alone the right to life of the unborn child. Because of its obvious intent, if put into practice, this bill would be to the legislative process what the coat-hanger is to the back-alley abortion, the hook that would bring about the abortion no matter what other damage might be done to the rest of the body politic.

In my opinion and from the articles and polls I have read about the attitudes and convictions of people on abortion, this bill fails totally to acknowledge the spectrum of attitudes and convictions among our people.

This brings me to my second point. I do not think that such an extreme bill, as this is, is a responsible approach to formulating good public policy.

It might be that my necessarily rapid perusal of this legislation leaves me with an impression that unfairly characterizes this bill. But the fact of the matter is that little advance notice was given of this legislation or the hearings. Furthermore, I have reason to question just how much public notice was given to this bill and this hearing. Bishop Michael Kaniecki of Fairbanks is presently visiting villages along the Yukon. On the phone yesterday he was totally surprised by the existence of the bill and said that as far as he knew no one knew of it out there in the villages. He was sure that if it were generally known, his people would have asked him about it.

Bishop Kaniecki joins me in opposing this bill.

- 2 -

I know many of you legislators and respect you as responsible representatives of the people. You have shown this in many issues in which I am personally involved. So, if I am mistaken in my characterization of this bill, I apologize. Perhaps I should express myself this way: On this bill some legislators have really blown it.

My appeal to you is that you approach this question from the stance of formulating good public policy that respects and acknowledges the rights of everyone affected by abortion including the circumstances that push people to select abortions. This bill is so biased, so insensitive to the legitimate and conscientious concerns of our general population that it will never foster the kind of debate and dialogue that will lead to good public policy. Too long the public arguments about abortion have been verbal shouting matches and demonstrations. It can be otherwise and in the state legislature it should be otherwise. It is my hope and prayer that the Alaska legislature can set a high standard for formulating public policy on a publicly volatile issue. This bill will never serve as a springboard for such a high standard.

Thank you for your time.

With your permission I will submit a written critique at a later date.

RECEIVED
APR 29 PM.



League of Women Voters of Alaska

Date: April 25, 1991
To: Rep. Georgianna Lincoln
House HESS Chair
From: Marge Hays, President
League of Women Voters Alaska (LWVAK)
Re: Senate Bill 249

The League of Women Voters of Alaska met at the statewide convention this past weekend, and in their *directions to the board*, asked that I write immediately in support of S 249.

The League strongly feels that women are entitled to make their own choices regarding abortion. Women in low income situations should not be deprived of this option. In addition, Medicaide should not be with-held for those needing financial assistance in this private matter.

We have a National LWV position which has been the basis for active lobbying in the U.S. congress concerning this issue.

We strongly urge you to support this bill in its entirety.

Thank you.

L.W.V. ALASKA
MARGE HAYS
Box 2876
Soldotna, AK 99669

TELECOPY COVER SHEET

Fairbanks Legislative Information Office

Office • (907) 452-4448

Fax • (907) 456-3348

TO: House HESS CMTE FAX: _____ PHONE: 465-3759

FROM: Int LIO PHONE: _____

INSTRUCTIONS: Please forward this written testimony
for HB 268: TC held on 4/25/91 8:00 A.M.
Rep Leneck Chair

RECEIVED: Date _____ Time _____

SENT: Date 4/25/91 Time _____

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 9 (Not counting cover sheet)

SENT BY: Fran



Alaska State Legislature

Please enter into the record my testimony to the HESS

committee name

committee on HB 268, dated 4/25/91
bill/subject

I strongly support HB 268 and I am against administrative intent to change public policy.

Pregnancy and childbirth are private issues. The state should not be involved in determining when a woman bears a child. Abortion is legal in the state of Alaska - it should not be legal for some women and not for others, as would happen if funding is cut off for poor women.

By forcing women to bear children which they cannot afford to support, we are diminishing their chances of providing a good home for their families. quality of life is extremely important.

I don't have the exact figures, but the small amount from general relief funds for abortions must be much less than the state dollars spent on welfare for families - welfare costs would increase with the increase in number of unwanted children if Alaska public policy changes on this issue.

I urge you to vote for HB 268.

Signed: Mary Ann Borchert
Testifier

Representing (Optional)

1758 Chena Ridge, Fbks
Address

479-2087
Phone No.



Alaska State Legislature

House

Please enter into the record my testimony to the

H/55

committee name

committee on HB 268
bill/subject

dated 4-26-91

On behalf of women in the State of Alaska we want to thank you for introducing HB 268 protecting reproductive freedom. Thank you again

Signed:

Elaine & Jake Jacobsen

Testifier

Private Citizens

Representing (Optional)

2125 Second Ave

Address

907-225-3395

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HESS
committee name.

committee on HB 268, dated _____
bill/subject

I strongly oppose HB 268.

We enact laws to warn Alaskan mothers against poisoning their pre-born children with alcohol. We pay for postees & require their posting in all alcohol dispensing establishments. Now you want to encourage Gov. funds to pay to end the life of the pre-born child.

In other words, please don't poison your pre-born child. But if you want to kill that child, we will pay for it.
Please kill this bill.

Signed: Doug Puffett
Testifier

Representing (Optional)
1162 Hayes Avenue, Fairbanks 99709
Address
479-2197
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Health & Social Service
 committee on SB 249 , dated April 25, 1991
HB 268 , dated April 25, 1991
 bill/subject

I oppose this bill because it does much more than maintain the status quo.

It takes away the right of hospitals and doctors to refuse to perform abortions for reasons of conscience.

It removes parental consent, thus disrupting family unity.

Refuses to permit counseling of any kind before abortion. Women must have a chance to examine alternatives as well as physical and p

Signed: Janne M. Byrnes
 Testifier

Alaska Rt to Life of the Interior

Representing (Optional)

P.O. Box 74368 Fairbanks AK 99707
 Address

907 457 2179
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Health & Social Services committee name..

committee on H.B. 268 , dated April 25, 1991
bill/subject

My husband Phil & I - Genevieve Carbooy totally oppose H.B. # 268. Spending our hard money for the support of killing innocent victims (unborn children) is both illegal and immoral.

We were taught "You Play - You Pay" We must pay for the consequences of our actions. If this bill passes - it may also lead to euthanasia - or genocide of the elderly and physically unfit. We should support the education of the young - to say NO to illicit sex and prevention of pregnancy. We should support the sanctity of life. Whether one is pro or pro risk is not the issue. A woman's rights mentioned - Yes - a woman has the right to say "NO" to sex! Please Don't urge you not to kill the innocent victims but to Kill H.S. 268. I wish to mention the ^{future} consequences of abortion. I've (Genevieve) witnessed the guilt feeling, adverse effects and emotional scars following an abortion.

Signed: Genevieve T. Carbooy
Testifier

My husband & 3 children and granddaughters
Representing (Optional)

P.O. Box 60395 Fairbanks Alaska 99706.
Address

(907) 479-7333
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Health & Social Services committee name.

committee on HB 268, dated 4/26/91.
bill/subject

I am opposed to bill HB 268 and all that it may import.

I am for parental guidance and responsibility of family.

I do not believe public funds should be directed to this bill but used only for the good of all citizens.

Has one thought of the physical or mental problems that might result immediately or in the future.

We have to fear for the morality of our ^{country} in this issue. We are responsible for our actions whether done prudently or imprudently and have to meet the consequences.

Signed: Mathias Pantora
Testifier

Self
Representing (Optional)

286 Ester Drive, Jbps 99709
Address

479-2047
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H E S S
 committee name
 committee on HB 268, dated 4/25/91
 bill/subject

I am Co-Chairperson of the Fairbanks Coalition for Privacy in Pregnancy Decisions. The Board of this group is strongly supportive of HB 268.

Abortion is legal in the United States and in Alaska. We are of the opinion that State funds should continue to be made available to assure that all women have equal rights ~~to~~ in making decisions concerning the various options available to the pregnant woman.

HB 268 should be passed to assure that General Relief Medical Funds are available to all women who are in need of help.

Signed: Philip A. Wice, M.D.

Testifier

Fairbanks Coalition for Privacy in Pregnancy Decisions

Representing (Optional)

1648 Skyflight Ave. Fairbanks AK 99709

Address

907-455-6072

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HESS
committee name

committee on HB 268 , dated April 25, 1991
bill/subject

I would like to testify in support of House Bill No. 268. I support this bill because it would ensure equal access to health care procedures already available to women with the ability to pay for them. I also support this bill because it represents good fiscal policy. Although I don't have current figures for Alaska, in 1989, nationwide costs for abortion ^{averaged} ~~reached~~ from \$200-300 while costs to Medicaid ~~for~~ supporting a child from birth to age 2 were about \$6,700. The costs to the state for denying Medicaid for abortions could be 20 times the cost of the abortion.

Finally, I would like to say that we are not debating a women's right to an abortion this morning. That is already established in this state. The question before us is whether poor women should have equal access to this procedure. Furthermore, as a member of the Episcopal Church which believes that the decision to have an abortion is private moral decision, I am offended by the testimony of those who wish to impose their perceptions of God's Will on others.

I'm sorry there wasn't time for me to testify today, but I appreciate the opportunity to make my views known in writing.

Signed: Grant E. M. Mathelce Grant E. M. Mathelce
Testifier

Representing (Optional)

2064 Goldstream Rd, Fairbanks, AK, 99709

Address

455-6470

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Hess Committee
committee name.

committee on HB 268, dated April 25 '91
bill/subject

This bill violates the right of the unborn and confuses the issue of choice by postponing it until after the consequence. ~~The~~ Another issue is raised that women have the right to control what happens to their bodies. That right stops when another life is involved. Why is so much effort given to saving the life of drug or alcohol effected fetuses while at the same time taking the life of others. As long as there is life it should be protected ~~in~~ with the same effort that you representatives have ~~from~~ someone who would choose to kill you. You would be ludicrous to suggest that a murderer has that right... yet when the victim is unseen and unheard you don't consider ~~him~~ his rights!

This bill contradicts itself in the first three lines, advocating no government interference while at the same time advocating Medicaid and general relief assistance. That certainly is government involvement which many would consider interference, especially with tax money being used for the destruction of human life. Please withdraw HB 268

Signed: Ted Franke
Testifier

Representing (Optional)
P.O. Box 10434 Fairbanks, AK 99710
Address
457-6059
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the H Hess

committee name
(introduced 4-10-91)

committee on House Bill No. 268 . dated April 25, 1991 .
bill/subject

I am strongly opposed to HB #268. I could write a thesis covering the reasons why, however I will limit myself. I apologize for the lack of polish but not for the content of this testimony.

The basic fabric of our nation is the premise that all human beings are created equal, with inherent and inalienable rights. The fundamental rights of women are derived from these inherent and inalienable rights of all human beings. A woman who thinks men are trying to control or manipulate her by disallowing abortion is confused. The control and manipulation took place when she allowed a man to join her in sexual ~~union~~ liaison when he was not bonded to her and to the result of their relationship by commitment. A woman becomes pregnant when she has exercised her rights over her body.

The rights of any subset group of human beings cannot be legislated away with at diminishing the rights of all other humans. Just because this effect may not be felt immediately does not mean it is non-existent.

Unborn children are a group of human beings without the ability to represent themselves or exercise their rights. This does not mean they have no rights. They are simply unable to protect, demand or plead for their rights or their life. All other groups, with and without these limitations, are legally protected, legislatively protected. Unborn children should also be protected, rather than conspired against.

Signed: Susan L. H. Yarish
Testifier

Allen E. and Susan L. H. Yarish
Representing (Optional)

602 Lathrop
Address

Fairbanks, Alaska 99701

Phone No. (907) 456-2488

Thank you for taking responsible action to protect the rights of those who are unable to protect themselves.

Re. HB 268

My position is pro-choice. It is not for or against abortion. My personal feelings about abortion, about whether it is right or wrong, whether the procedure is killing a baby or removing foreign tissue has no place in the discussion of what is a very personal individual decision about a procedure that is now legal and should remain so.

I am a realist. I know that whether or not abortion is legal, they will continue to take place. Those women who can afford them will have them, legal or not. Those who can't afford them will have to depend on the willingness of the system to provide them. Unfortunately there are those who will use their hold on the purse strings to enforce their will on others. They know how powerful is that control, and sadly, so do many other women in this country.

Why must this be about power and control? Why must women and the children they are forced to bear suffer because of the willfulness of those in power? Wouldn't it be better to use that power for health and education of those who are here?

Right now we are hearing the complaints about the cost of the educational system, the health and welfare system, even the highways and housing in this state. I don't understand why, at the same time those complaints are being volcad, women are being told they must bear the child they feel unable and unwilling to bring into this world.

Somehow that sounds to me like giving birth to a child is a sort of punishment for sexual activity deemed inappropriate by some. A scarlet letter, an "illegitimate" child. You want to dance, honey, you're going to have to pay the piper.

Oh yes, we hear about the lack of children available for adoption. Are we saying these pregnant women are baby factories? Can't we understand that once they have carried the baby to term, they will want to keep it? It often isn't lack of love or caring that brings women to the need of an abortion. It may be lack of support from family, friends, spouse. It may be any combination of things bringing the woman to what is a very personal decision.

And that brings this statement right back to where I started. Abortion is and must remain, a very personal decision. It must be available to all women in this state, regardless of their ability to pay. And those of us not able to bear children, or not likely to, have no business involving ourselves in other people's decisions.

Martha (Martie) Rozkydal

P.O. Box 400

Palmer, AK 99845

746-2229, daytime

 FAX TRANSMITTAL MEMO
 TO: Houli HESS
 DEPT: _____ FAX #: _____
 FROM: HAT-SULIQ PHONE: 376-3709
 CO: _____ FAX #: 376-6180
 Post-it® brand fax transmittal memo 7671

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3



Alaska State Legislature

Please enter into the record my testimony to the _____
 committee name
 committee on HR 268 , dated 4-24-91
 bill/subject

I am adamantly against this verbage. I consider myself a reasonable person. I absolutely will not allow public funding for a capricious private matter ^{such} as abortion.

Either I murderer by silence or those who have an opposite opinion hate me because I speak against their opinion. We have such technology available today. You simply go and get your tubes tied, ^{use} the homosexuals saving device; the infamous condom. But what could be happening to this fetus? Expensive facial make-up? Fetus for sale, or doctors connecting tiny baby parts to mice? This is the height of ineptness of a nation, and your lawmakers will be held accountable. Will this be our history? Let it not be mine!

Signed: Carolina J. Domantoff
 Testifier

Representing (Optional)
HC 30-5569 NE Wasilla, AK. 99687
 Address
373-5569
 Phone No.

6



Alaska State Legislature

Please enter into the record my testimony to the _____
 committee name
 committee on House Bill No. 268 , dated _____
 bill/subject

I have carefully read this Bill and can only wonder why any thinking person would object to it. It provides for keeping peace in a family where parental domination is severe toward daughters. It also provides for keeping the government and its agents out of the private lives of all couples.

This Bill provides for both medical and dental care in the spirit of our new national governmental policy of being kinder and more gentle in all we do.

I must commend members of both the House and Senate for their progressive stand in presenting these Bills. Support for passage of the Bills can be measured by deducting the vocal few who object from the total eligible voters. This message needs to be broadcast statewide so there will be plain understanding of exactly what is stated in Bill 268.

Signed: Mrs. Lois M. Knapp
 Testifier
Myself, and a few friends
 Representing (Optional)
P. O. Box 232, Houston, 99694
 Address
892 - 6304
 Phone No.

6



Alaska State Legislature

Please enter into the record my testimony to the HES5
 committee name
 committee on HB[#] 268 ABORTION, dated 4-25-91
 bill/subject

I strongly oppose this bill, it is not needed. There are presently enough regulations and provisions that meet the needs of Alaska's as related to this issue.

I encourage all legislators to do those things that will encourage individual responsibility and self esteem in our educational system.

Signed: Lawrence E. Furbush
 Testifier

The General Public
 Representing (Optional)
HCO1 Box 6001 PALMER, AK 99645
 Address
(907) 745-3357
 Phone No.

Dear Rep. Lincoln:

We endorse HR 268 without the least equivocation.

To deny women any right because of their economic plight would be a blight upon the conscience of Alaska.

Ernest E. Line

Ernest E. Line
2645 WHISP WDS. DR.
WASILLA, AK 99687

Mavis M. Line

Mavis M. Line
2645 WHISP WDS. DR.
WASILLA, AK 99687

 FAX TRANSMITTAL MEMO
 TO: Harris Judiciary
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 FROM: W510 PHONE: 376-3704
 CO: _____ FAX #: _____
 Post-It brand fax transmittal memo 7671

NO. OF PAGES
1

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Ketchikan Legislative Information Office

Office - (907) 225-9876

Fax - (907) 225-8546

TO: (H) HESS COMMITTEE FAX: 465-2864 PHONE: _____

FROM: Klm UO PHONE: _____

INSTRUCTIONS: Written Testimony, HB268 - T/c 91-04-126

NOTE
PG #6 goes to the (s) HESS - Shane

RECEIVED: Date _____ Time _____

SENT: Date 4-25-91 Time 1:50PM

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 6 (Not counting cover sheet)

SENT BY: Rae



Alaska State Legislature

Please enter into the record my testimony to the Health, Education
 committee name Social Services
 committee on HB-268, dated April 10th, 1991
 bill/subject

See attached
 Reference to Carol Everett
 was from "An Abortionist
 Turns Pro-Life"
 from Focus on Family
 1-800-A-Family, ask
 for CS-429

and New Dimension Magazine
 October 1990

Signed: Meresa A. Cooper
 Testifier
 Representing (Optional) Life, Inc. (as How Everyone C.H.F.E. Inc)
 Address 1123 Black Bear Rd., HTN, AK. 99901
 Phone No. (907)-225-6588, Life, Inc. (907)-249-5433

Life, Inc. Address
 P.O. Box 7962
 HTN, AK. 99901

HEALTH, EDUCATION & SOCIAL SERVICES

COMMITTEE HEARING ON

HB-268, THE REPRODUCTIVE PRIVACY ACT

THURSDAY, APRIL 25TH, 1991

TESTIMONY BY TERESA CREVIER
REPRESENTING L.I.F.E. INC.
P.O. BOX 7962
KETCHIKAN, ALASKA 99901

TESTIMONY REQUESTED BY NIILO KOPONEN PRIMARY SPONSOR
OF HB-268

GOOD MORNING, MY NAME IS TERESA CREVIER. I'M A REGISTERED
VOTER IN DISTRICT ONE - KETCHIKAN AND I'M HERE TO SPEAK IN
OPPOSITION TO HB-268, THE REPRODUCTIVE PRIVACY ACT.

MY OPPOSITION TO ABORTION ON DEMAND COMES FROM MY OWN CRISIS
PREGNANCY EXPERIENCE, FROM WORKING IN A LOCAL CRISIS PREGNANCY
CENTER AS A LAY COUNSELER, AND THRU THAT SEEING FIRST HAND THE
DEVASTATING ABORTION HAS HAD ON WOMEN AND MEN OF ALL AGES,
AND ALSO MY KNOWLEDGE OF THE ABORTION INDUSTRY ITSELF. THESE
THREE COMPONENTS FIRMLY CONVINC ME THAT ABORTION COMPOUNDS
RATHER THAN SOLVES PROBLEMS ASSOCIATED WITH A CRISIS
PREGNANCY. THIS PRO-ABORTION LEGISLATION SEEKS TO MANDATE
STATE FUNDED ABORTION TO LOW-INCOME WOMEN FOR ANY REASON AND
ON "DEMAND". FURTHERMORE, IT MANDATES ABORTION AS AN
ALTERNATE METHOD OF BIRTH CONTROL WHILE TAKING AWAY THE
EXISTING RIGHT OF A HOSPITAL OR DOCTOR TO CONSCIENTIOUSLY
OBJECT TO PARTICIPATE IN AN ABORTION. IT ALSO ALLOWS STATE
AGENCIES TO PROVIDE ABORTIONS FOR MINORS WITHOUT PARENTAL

CONSENT. THIS LEGISLATION PLACES THE STATE OF ALASKA IN GREAT FINANCIAL PERIL.

FINANCIAL RISK TO THE STATE COMES FROM FUNDING ABORTIONS TO WOMEN, AND SPECIFICALLY ALLOWING MINORS TO HAVE A SERIOUS AND DANGEROUS PROCEDURE AS ABORTION WITHOUT PARENTAL CONSENT. ACCORDING TO A STUDY QUOTED FROM "ABORTED WOMEN, SILENT NO MORE" DAVID REARDON, 1988:

74% OF ABORTING WOMEN HAVE PHYSICAL COMPLICATIONS.

6% HAVE HAD TOTAL HYSTERECTOMIES

6% REPORTED CERVICAL CANCER

8% HAD BLOCKED FALLOPIAN TUBES

9% HAD INFECTIONS

8% HAD CERVICAL INCOMPETENCE

15% HAD POST-OPERATIVE HEMORRHAGE

22% MISCARRIED A LATER WANTED CHILD

CARROL EVERTT, A PAST DIRECTOR OF 5 TEXAS ABORTION MILLS ADMITTED ON AN NATIONAL RADIO SHOW THAT 1 OUT OF 500 WOMEN HAVE SERIOUS PHYSICAL ABORTION-RELATED COMPLICATIONS.

ON SUNDAY, APRIL 21ST, 1991 THE TV NEWS SHOW 60 MINUTES BEGAN TO EXPOSE THE ABORTION INDUSTRY. IT CENTERED ON THREE WOMEN WHO OBTAINED ABORTIONS AT THE HILLVIEW ABORTION CLINIC IN MARYLAND. ONE WOMAN DIED, ONE WOMAN IS PARALYZED FOR LIFE, AND THE THIRD WOMAN WENT IN FOR AN ABORTION AND INSTEAD RECIEVED A TOTAL HYSTERECTOMY. 60 MINUTES WENT ON TO INTERVIEW A FEMALE "PRO-CHOICE" MARYLAND LEGISLATOR. SHE WAS

APPALLED AT THE LACK OF REGULATIONS REQUIRED FOR THE ABORTION INDUSTRY. SHE TRIED TO INTRODUCE SAFETY AND HEALTH REQUIREMENT LEGISLATION FOR ABORTION MILLS AND WAS FOUGHT TOOTH AND NAIL BY THE NATIONAL ABORTION RIGHTS LEAGUE, NATIONAL ORGANIZATION OF WOMEN AND OTHER NATIONAL ABORTION RIGHTS ADOVATES.

THAT FEMALE "PRO-CHOICE" LEGISLATOR NOW BELIEVES BECAUSE OF HER FINDINGS -- AND THIS IS A DIRECT QUOTE "THAT NOW ALL "PRO-CHOICE" ARGUMENTS ARE SUSPECT".

I STRONGLY RECOMMEND THAT ALL SPONSORS OF HB-268 WITNESS A 1ST TRIMESTER DILATION AND CURETTAGE ABORTION, A 2ND TRIMESTER DILATION AND EVACUTION ABORTION, A SALINE OR (SALT POISONING) ABORTION, A PROSTAGLANDIN ABORTION AND A 3RD TRIMESTER HYSTEROTOMEY ABORTION. I RECOMMEND THIS BECAUSE OF THE LIABILITY YOU PLACE THE STATE IN WHEN A MINOR SEEKS A STATE FUNDED ABORTION WITHOUT PARENTAL CONSENT. THIS LEGISLATION EXPLOITS WOMEN, DISRUPTS PARENTAL RIGHTS, AND MANDATES THE STATE TO PARTICIPATE IN THE KILLING OF INNOCENT CHILDREN. WITHDRAW YOUR SUPPORT TO THIS OFFENSIVE BILL. THANK YOU.



Alaska State Legislature

Please enter into the record my testimony to the ^{House} Health, Education & Social Services,
committee name

Finance committee on HB-268, dated 4/10/91
bill/subject

I strongly urge passage of HB-268 & SB-249 to ensure protection of women's rights to abortion and birth control. A woman's ability to control pregnancy has a direct affect on the quality of her life as well as that of any offspring she may bear. Any hope of overcoming many of our social problems stems from our capability to control reproduction.

Just as a woman has a right to pre-natal and post-natal care, so should she be guaranteed access to all types of birth control. Each woman's chemistry varies & it's therefore imperative that all forms of birth control be available to enable her to choose one that is effective.

Just as having a child is a personal choice which should solely be a decision of the woman, so should be abortion. A woman should not be subjected to humiliation, mutilation or possible death by being forced to seek illegal abortion because of lack of funding for abortions through Medicaid or general relief medical assistance. Choosing abortion is an intensely personal decision which can and should ultimately be decided by the woman herself. Often it is a tragedy for a woman to have to make this decision due to economics, but it is also a tragedy for a woman to be forced to carry a pregnancy to term, often threatening her ability to provide for herself, or forcing her to discontinue her education which is the major factor in her ability to provide adequate care to a family.

I think HB-268 and SB-249 are well-thought and written bills that should be supported and passed. Women must have the right to commence, prevent, continue or terminate a pregnancy, which is a matter of profound personal choice. A woman's right to abortion should not be hindered by her economic status.

Signed: Jill Dobrydnia

Testifier

I am a member of the Coalition of Alaskans for Choice-Ketchikan,
Representing (Optional) testifying as an individual

P. O. Box 653, Ward Cove, AK 99928

Address

247-2307

Phone No.

TELECOPY COVER SHEET

Ketchikan Legislative Information Office

Office - (907) 225-9875

Fax - (907) 225-8546

TO: House HESS FAX: 465-2864 PHONE: _____

FROM: Ketchikan LIO PHONE: _____

INSTRUCTIONS: Testimony on HB 268

RECEIVED: Date _____ Time _____

SENT: Date 4/26/91 Time _____

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 2 (Not counting cover sheet)

SENT BY: RAE



Alaska State Legislature

Please enter into the record my testimony to the HHESS
 committee name
 committee on HB 268/SB 249, dated 4.26.91
 bill/subject

I oppose HB 268 and any similar legislation that may later be introduced. State funded abortion, without parental consent for minors, is not only completely wrong, but would also be spending our money in a way that the majority of the people of Alaska SIMPLY DO NOT WANT !!

I encourage ~~the~~ our representatives who are pro-abortion to visit a clinic where these things are practiced. You want to see "the killing fields"?!

If the State of Alaska and her people truly want to help "crisis pregnancies", (99% of the time a result of loose morals) then lets establish in this STATE Adoption agencies, lets encourage adoption @ our health clinics (also state funded) instead of ABORTION!

Signed: Raymond V. K...
 Testifier

Representing (Optional)
6069A S. TONCAST HWY. KTN AK 99901
 Address
225-2031
 Phone No.

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Ketohikan Legislative Information Office

Office - (907) 225-9875

Fax - (907) 225-8546

TO: (H) HESS CMTE FAX: 465-2864 PHONE: _____

FROM: Klm LIO PHONE: _____

INSTRUCTIONS: Written Testimony HB268

RECEIVED: Date _____ Time _____

SENT: Date 4-29-91 Time 10:30 AM

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 1 (Not counting cover sheet)

SENT BY: Rae



Alaska State Legislature

Please enter into the record my testimony to the HOUSE H/55
 committee name
 committee on HB 268, dated 4-28-91
 bill/subject

Any woman must have a choice to their body and what their say is to what happens to their body. IF someone cannot their right to choice because of money- than why do we live in the United States of America? Will girls that want abortions have to choose a dangerous way to have an abortion? This is a question of life and death! Women will find a way legally or not, PLEASE HELP THESE PEOPLE! I was a child and I didn't have any idea of what to do once. Try to put yourself in their place! A person needs a choice that is not hampered. It is not a choice that is easy - someone lives with this for the rest of their lives. BUT to be able to have this choice is the AMERICAN WAY!

Signed: Mollie Burton
 Testifier
Wayne J. L. L.
~~Representing~~ TESTIFIER
5774 KTN AK
 Address
225-8414
 Phone No.

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Ketchikan Legislative Information Office

Office - (907) 225-9875

Fax - (907) 225-8548

TO: (H)HESS COMMITTEE FAX: 465-2864 PHONE: _____

FROM: Ktn LIO PHONE: _____

INSTRUCTIONS: Written Testimony HB268 (T/c #91-04-126)

RECEIVED: Date _____ Time _____

SENT: Date 4-25-91 Time 4:10PM

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 1 (Not counting cover sheet)

SENT BY: Rae



Alaska State Legislature

Please enter into the record my testimony to the HHCS
committee name

committee on HB 268, dated 4/25/91
bill/subject

As a Christian I oppose House Bill #268 because I feel God is the author of all life. I feel that no one has the right to take the life of an unborn child, which all reading this and I once were.

Secondly as a tax payer and voter, I am very opposed to my tax dollars going to support state-funded abortions. Poor women or not, you cannot take away the responsibilities of any woman or man. If they are poor or if they are rich they still need to take responsibility for their actions young or old. I feel I can say this because I also was a teen in a crisis pregnancy. I accepted my responsibilities and now have a wonderful son. Abortion is not the way out. Please do not try to cover up for others actions and use our tax dollars to pay for it.

I was born in Alaska and have lived here all my life. I feel that House Bill #268 would be destructive upon the family unit here in Alaska. By giving teenage girls the chance to have abortions without parental consent, I feel that the state is trying to take the place of the parents. It promotes promiscuity by having abortion so readily available, which would increase the number of pregnancies and venereal diseases.

Please reject House Bill #268

Signed: Terri L. Kolean
Testifier

Representing (Optional)

6069A S. Tongass Hwy., Ktn. Ak. 99801

Address

(907) 225-2031

Phone No.

TELECOPY COVER SHEET

Ketchikan Legislative Information Office

Office - (907) 225-9878

Fax - (907) 225-8548

TO: (S) HESS CMTB FAX: 865-2864 PHONE: _____

FROM: Am LIO PHONE: _____

INSTRUCTIONS: Testimony from Eileen Maama also goes to the (S) HESS CMTB

RECEIVED: Date _____ Time _____

SENT: Date 4-29-91 Time _____

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 2 (Not counting cover sheet)

SENT BY: Roe



Alaska State Legislature

Please enter into the record my testimony to the H-255
committee name

committee on H 268, dated 4/29/91
bill/subject

I graduated from Nursing school in 1955. I have held a license to be an RN in Alaska since 1965.

The medical community has made many mistakes because of ignorance. Scientific medical evidence supports the pro life position.

I oppose the passage of H268 in any form except changes to the life of the mother.

Signed: Susan G. Gass RN
Testifier

Representing (Optional)

719 Grant St Ketchikan
Address

225 3482
Phone No.



Alaska State Legislature

Senate HESS

Please enter into the record my testimony to the

House Health & Social Services

committee name

committee on

HB 268/SB249, dated4/29/91

bill/subject.

I am writing in support of HB 268. It is very important that all Alaskan women have resources to choose medically-safe abortions.

Alaska currently has a child abuse rate that is twice the national average. Factors associated with child abuse are a low support network, lack of financial resources and depression. Women living in poverty often experience these same factors. To withdraw Medicaid Funding for abortions from them would increase the effects of low support and inadequate resources. Life is hard enough. Let us not ~~allow~~ allow government to increase the burden on women who are all ready experiencing difficult life circumstances. ~~please pass~~ ^{please pass} HB 268, as written, and maintain ~~existing~~ ^{existing} support of all women's choices.

Signed:

Eileen Karma

Testifier

Representing (Optional)

2034 First Avenue, Ketchikan, AK 99901

Address

225-5927

Phone No.

1551 Farmers Loop
Fairbanks, Alaska 99709
29 April, 1991

Hon. Ben Grussendorf
Alaska State House of Representatives
Box V
Juneau, Alaska 99811

Dear Rep. Grussendorf;

This letter is in support of HB 268. Surveys show that most Alaskans favor women's right to choice in reproductive decisions without interference by the State. I am appalled that a noisy minority may be able to impose its religious opinion against that right to choose on the majority. HB 268 is aimed at protecting the right of choice for all women, but particularly protects the rights of the disadvantaged to enjoy equal justice which is in jeopardy when the writing and amending of regulations is left to the Lt. Governor.

Soliciting the views of women on this question will not result in receiving opinions from the women whose rights are most threatened (who rarely vocalize their views); the poor and otherwise disadvantaged; those who may be impaired by drugs or alcohol; and the very young. Representative government is designed to protect these people. I hope you will see your responsibility to them and support HB 268.

Sincerely,



Ruth G. Benson

479-6912

Testimony Before House Health, Education and Social Services
by Laury Roberts Scandling
April 25, 1991
(not delivered orally due to lack of time)

My name is Laury Roberts Scandling. I am a fulltime student and homemaker in Juneau. I was born and raised in Alaska and am the mother of twins. I am speaking for myself as a consumer of several reproductive choices, including motherhood, and, perhaps, I am speaking for the women you won't hear from: the Alaskan woman who does not have a voice in this process nor the resources to deal with a crisis pregnancy.

I do not think there is anything new that one can say either in support or in opposition to measures assuring reproductive privacy. Abortion is a fundamental issue that tears at the conscience of each of us, regardless of our position. Our beliefs are held dearly, as well they should be.

As a woman and mother, I respect, understand and sympathize with individuals who oppose abortion, for whatever reason. I just happen to believe that they should not be able to make that choice for everyone.

Nonetheless, this measure is not about permitting abortion, access to which was upheld by the U.S. Supreme Court 18 years ago. Nor is it about choosing where our tax dollars go. It is about ensuring that the will of some will not penalize others for socioeconomic or other reasons.

I am reminded of a story I uncovered about ten years ago when I was a reporter. An administrator in the state's benefits division unilaterally and secretly removed abortion as a covered health insurance option for state employees. Once his action became public the attorney general ordered that the benefit be reinstated.

This story illustrates what I find most frightening about this bill: that it must be considered at all, that one man believes so strongly in his vision of the world that he will use political means to impose that vision upon everyone.

Contrary to an oft-heard declaration, the people of Alaska have **not** delivered a mandate. Two-thirds of the votes cast last November were for gubernatorial candidates who favored choice.

So, when the clamor becomes deafening, keep this in mind: Alaskans do not want government making the most personal of choices for them.

I find it ironic that an administration elected on platform of independence from government doesn't heed it when it comes to controlling reproductive choice.

I would like to close by thanking the many cosponsors, particularly the Republicans, for standing up on this issue. While I believe reconsideration must be given to the section on parental consent, the bill rightly codifies important public policy.

TO: All cosponsors

SCANDLING
BOX 021553
JUNEAU, AK 99802

RECEIVED
MAY - 2 P.M.

April 29, 1991

Representative Georgianna Lincoln
Committee Co-Chairwoman
P.O. Box V
Juneau, AK 99811

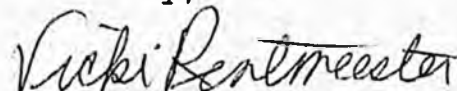
RE: House Bill 268

Dear Representative Lincoln:

I am writing to urge you to support House Bill 268, which will protect a woman's right to choose abortion. I do not want a radical group of fundamentalists forcing their religious beliefs on the public through force of law. There are already too many unwanted children in the world who are suffering from neglect and abuse. The focus should be on how to better care for them instead of bringing still more unwanted children into the world. I believe most of the social and global problems we are facing, such as pollution/global warming, drug abuse, and increased crime, are due to over-population and the inability of our society to take care of the people who already exist. The time has come to focus on quality of life instead of quantity of life.

Every child should be a wanted child. It is a woman's personal choice to decide how she deals with an unwanted pregnancy, and it should remain her own choice--no one else's. Again, please support House Bill 268.

Sincerely,



Vicki Rentmeester
48700 East Road
Homer, AK 99603

**Fax #465-2652
Voice # 465-3732 / #465-4923**

**Co-Chairman of HESS (Health Educational Social Services)
Georgianna Lincoln**

HB #268 - REPRODUCTIVE PRIVACY ACT

**Please hold more public hearings on this vital issue of HB #268.
Abortion is a horrendous alternative to reproductive responsibility.**

Respectfully,

**Muriel M. House
Alaskan Voter**

**Fax #349-4495
Voice #344-2398**

**2307 WE. 74th Avenue
Anchorage, AK 99507**

Fax #465-2652
Voice # 465-3732 / #465-4923

Co-Chairman of HESS (Health Educational Social Services)
Georgianna Lincoln

HB #268 - REPRODUCTIVE PRIVACY ACT

I urge the committee to hold more public hearings on this vital issue of HB #268. Without adequate public hearings, the committee will have to come to a decision with only a small input from the citizens of Alaska. This issue potentially touches every Alaskan family; therefore, it is only correct to allow time for every Alaskan family to voice their concerns over this pending bill.

Sincerely,

Linda D. Arden
Alaskan Voter

Fax #349-4495
Voice #349-8479

7333 Bern Street
Anchorage, AK 99507

To: The sponsor and all cosponsors of HB 268/SB249

From: Concerned constituents

We, the undersigned are deeply distressed by your sponsorship of HB 268 and companion SB 249, the liberalization of Alaskan statutes regarding abortion.

We find the provisions of the Bill to be unconscionable. At a minimum, its provisions will serve to create a rift between parents and their daughters and thereby undermine family unity. To believe that your constituency wants to see the state usurp the role and authority of parents in the family is a blind and unsubstantiated assumption on your part.

To further assume that Alaska residents would willingly dedicate state tax dollars for the performance of abortion causes us to question your qualifications to hold public office.

Abortion is a grievous crime against unborn children. Your Bill only serves to exacerbate the crime by making culpable all parties involved including the mother of the child as well as the hospital and staff where the abortion is performed.

We ask that you consider more carefully your position on this matter and withdraw your support of this bill.

Kim Wiff (Kimberly Wiff)
3529 Hampton, Anch. AK 99504
907-333-2483

Jeanette VanSickle (Jeanette VanSickle)
110175 Nantucket Loop
Anchorage, AK 99507 907-349-2906

Anne Monaco (Anne Monaco)
9221 Elgin Cir.
Anchorage, AK 99515
(907) 248-0744

ELOISE BISHOP (Eloise Bishop)
9506 W Parkview
Eagle Bluff, AK 99577
(907) 694-7419

To: The sponsor and all cosponsors of HB 268/SB249

From: Concerned constituents

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We find the provisions of the Bill to be unconscionable. At a minimum, its provisions will serve to create a rift between parents and their daughters and thereby undermine family unity. To believe that your constituency wants to see the state usurp the role and authority of parents in the family is a blind and unsubstantiated assumption on your part.

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We ask that you consider more carefully your position on this matter and withdraw your support of this bill.

*William Marchant DDS.
9700 Cheyenne Dr.
Anchorage, Alaska
99507*

*James D. Danielson
HC1 box 3690
Sterling, AK 99672*

Kanai Peninsula Legislative Information Office

Phone - (907) 262-9364

Fax - (907) 262-1881

TO: House HES S

ATTR: _____ FAX: _____ PHONE: _____

FROM: _____ PHONE: _____

INSTRUCTIONS: please consider as testimony on
HB 268. Thank you

ST: _____

DATE: 4-30-91 TIME: 8:10
DISCARD ORIGINALS _____ HOLD FOR PICKUP _____

NUMBER OF PAGES (not counting the cover sheet): 1

TRANSMITTED BY: Uesta

HB 268
HB 249: It is outrageous that individuals, like Mike Navarre who claim that the right to reproductive privacy includes protecting an individual's choice to murder other innocent human beings, are requiring those of us who have rational minds and the integrity to love and respect others, in the case of taxpayers, to pay for and in the case of health care providers who oppose their insanity, to participate in such an abomination as the slaughter of innocent babies! Furthermore, parents will not relinquish the right to protect their children and unborn grandchildren through the repeal of parental consent.

HB 174 - This infringement on parents' rights to protect their children from dangerous contraceptives, and unacceptable sexual behavior teaching, both of which are promoted by school based clinics is totally unacceptable.

HB 170 - The Women's Commission should stay intact & not be unraveled at the whim of politicians who suspect that their special interest or philosophically biased agenda will not be served by the commission.

HR 11 - I am opposed to the proposed women's task force to be appointed by certain legislators because it would allow those legislators a means of creating a strong arm of power to serve their own interests.

HJR 76 - I do not feel this resolution represents the wishes of most Alaskans, but only the wishes of those who either misunderstand or seek to destroy the well-being of traditional family life in America today.

The Kenai-Soldotna chapter of Alaska Right to Life represents approximately 1200 peninsula residents.
- Rebecca Perry 262-3995
P.O. Box 3423
Soldotna, AK 99669

M E M O R A N D U M

Library file

TO: HOUSE HESS MEMBERS
FR: PATTI, EXT. 4923
DT: APRIL 30, 1991
RE: HB 268 WRITTEN TESTIMONY

ATTACHED ARE COPIES OF ALL THE WRITTEN TESTIMONY FOR HB 268 THAT HAS BEEN RECEIVED BY THE HOUSE HESS COMMITTEE ROOM AS OF 2PM TODAY.

THE TESTIMONY HAS BEEN SEPARATED BY LOCATION FOR YOUR CONVENIENCE.

FOR YOUR FILES.

April 30, 1991

RECEIVED
MAY - 2 A.M.

Rep. Lincoln
P.O. Box V
Juneau, Ak 99811

Re: House Bill #268

Dear Representative Lincoln,

You and each of the representatives listed as sponsors of House Bill #268 are receiving a copy of this letter as well as my representative Jerry Mackie and Governor Hickel.

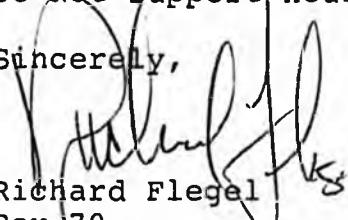
I am a married college graduate and a vice president and manager with an Alaskan bank. I have 2 children attending college.

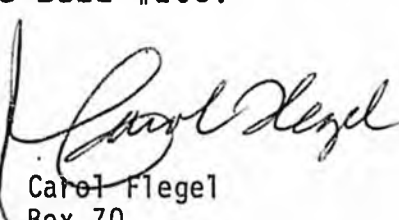
I am completely against the passage of House Bill #268 and do not feel the state government which represents me at all serves my interest by paying for abortion services. This bill is totally inconsistent with my philosophies on the right to life. The only possible gray area in my thoughts on this issue is if the abortion would be necessary to preserve a woman's life.

After reading House Bill #268 I find nothing else in it that I can support. I am disappointed in your sponsorship of that bill. I urge that you reconsider your stand since someday, when you die, you may find great difficulty in defending your chosen position.

Speaking more to the present you could consider your obligation to represent your constituency. So in that vein I cast my vote Do Not Support House Bill #268!

Sincerely,


Richard Flegel
Box 70
Haines, Ak 99827


Carol Flegel
Box 70
Haines, AK 99827



TELECOPY COVER SHEET

Kodiak Legislative Information Office

Office - (907) 486-8116

Fax - (907) 486-5264

TO: House H.E.S.S. Committee

ATTN: chairman FAX: _____ PHONE: _____

FROM: Kodiak LIO PHONE: _____

INSTRUCTIONS: Written testimony is submitted for the hearing that
that was held 4-25-91.

SENT: Date 5-1-91 Time 2:35 pm

DISPOSAL OF ORIGINAL: Discard _____ Hold for Pickup _____

NUMBER OF PAGES: 2 (NOT counting cover sheet)

TRANSMITTED BY: *Lina*



Alaska State Legislature

Please enter into the record my testimony to the House HESS
 committee on _____ committee name
 committee on HB 268 ^{Committee hearing held 4-25-91} dated Apr. 30, 1991
 bill/subject

I urge you to vote against this bill. Passage of H.B. 268 would send a confusing message from the House of Representatives to the teens in this state. On one hand, H.B. 7, which was passed recently, spells out pregnancy prevention as including abstinence from premarital sexual activity and acquiring skills to resist peer pressure, among other things. On the other hand, H.B. 268 is giving a blanket endorsement of abortion as a great option to the self-control required in abstinence. Why should teens bother to control themselves when it is so easy to kill the life that is conceived in their passion? And, if they can easily get rid of the obvious 'problem' that may result from their actions (a baby), they're not likely to be concerned with STD's, etc., since "that only happens to other people".

We are all aware of the stronger tendency in teens to act on the spur of the moment, or without carefully considering the consequences of their actions. Why else would we restrict their access to alcohol, or voting, until they are 'adults'? Teens (and we did, at their age) need some external controls to guide them in their actions and decisions. Removing the requirement for a minor to get her parent's permission for a major decision such as abortion, removes any hope of guidance in that decision from the person(s) who care the most about her - more than the state or an agency, I dare say, in the vast majority of instances.

Page 2 follows

Testimony to House HESS Committee on H.B. 268

Making abortion available on demand is a bandaid to quickly fix a big social problem. It may look really attractive as a way to cut back on the multitude of problems being addressed in many other bills concerning teen pregnancies and parenting which come before you committee. But our whole country has watched teen pregnancies escalate dramatically over the years since abortion has been a legal option. We have an advantage in being a newer state. Please look at the lessons to be learned from other states. Even though their overall rate of teen pregnancies has been lower, has abortion on demand really done anything to lessen the problem??

Concerning Sec. 7 of H.B. 268, I am appalled at the nerve of our state representatives to attempt to remove, from hospitals and health - giving places of business, the right to choose not to kill innocent people. If they choose to offer abortion services to people, that is one thing. But to force that on them, when their whole purpose of existence is to save people from death at all costs, is horrendous.

I'm asking you not to support this bill, if you truly care about the people of the state of Alaska. I'll be watching the activity of your committee.

Signed: _____

Testifier

Mrs. Laura Green

Mrs. Laura Green

S. R. Box 11020

Address

Kodiak, AK 99615

487-2468

Phone No.

May 1, 1991

Dear Legislator:

We are appalled at the recent introduction of abortion-related bills (HB 268 & SB 249) by our legislature. Is it possible some of our elected officials are out of touch with public sentiment or that they simply have not read the latest research and studies regarding this issue?

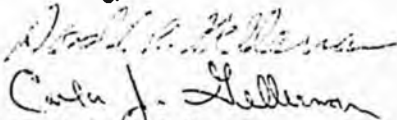
The most recent nationwide Gallup poll revealed more than 2/3 support requirements for parental consent for teenagers. Parents have a right to know when their child undergoes a surgical procedure. Failure to do so can be tragic. Last December a New York City jury awarded \$1.2 million to the parents of 13 year-old, Dawn Ravanell, who died of complications resulting from an abortion, of which they were unaware until their daughter lay dying. Parental notification laws are constitutional and help reduce the teenage abortion rates and teen pregnancy rates, when enforced (Alaska's are not!). A recent study showed that, in Minnesota, after enactment of a one-parent notification law, "the abortion rate falls dramatically".¹ Also, under the law teenagers were "more likely to take measures to avoid pregnancy. In other words it appears that parental notification has encouraged responsible sexual behavior among teenagers in Minnesota", reported lead author of the study, Professor James Rogers, to a Congressional committee.

Almost 90% support a woman's right to know (i.e. informed consent) and the need for health and safety standards in abortion facilities. While in the 1986 Thornburgh case, the Supreme Court struck down an informed consent law, in 1989's Webster decision, the three judge plurality criticized the Thornburgh statute. Together with Justice O'Connor, (a Thornburgh dissenter) and Justice Scalia (who would have reversed Roe vs. Wade explicitly), a majority of five justices are prepared to sustain informed consent legislation.² The "safe, legal abortion" rhetoric is but a lethal myth. "...the reported immediate complication rate, alone, of abortion is no less than 10 percent. In addition, studies of long-range complication show rates of no less than 17 percent and frequently report complication rates in the range of 25-40 percent. One public hospital has even reported an overall complication rate following abortion of 70 percent! It is quite possible that only 5-10 percent of all deaths resulting from legal abortion are being reported as abortion-related. ...based on the reported abortion deaths alone, abortion is already the fifth leading cause of maternal death in the United States"³ Knowing that state-regulated abortions are dangerous, even lethal, we are amazed to see bills introduced in Alaska that eliminate the requirements for abortions to be performed by a State Medical Board licensed physician or surgeon and for them to be performed in a hospital or other state or federal government approved facility. In truth, is this not the legalization of "back-alley abortions" that pro-abortionists have so long accused pro-lifers of promoting? Such reasoning defies all logic.

Polls also continue to show that more women oppose abortion than men. **For every one woman working for abortion, over 20 women are working against abortion.**⁴ It is certainly a women's issue, but women clearly do not benefit from it, nor do they want it!

We pray that you will listen to the vast majority of women and men in this nation and that you will acknowledge a solid body of research. Oppose this legislation and support life, health, safety and education for Alaska's women and children.

Sincerely,



Don & Carla Gellerman
4507 Wood Duck Ave.
Juneau, AK 99801
763-2383

1. American Journal of Public Health, March 91
2. Recent passage of the Mississippi and North Dakota informed consent laws all but guarantee that the Supreme Court will rule on the constitutionality of a strong and clearly enforceable informed consent law.
3. David Reardon, Aborted Women: Silent No More. Westchester, IL, Crossway, 1987, pp. 106-107 & 109-111.
4. *Ibid*, pp. 312-313.



Alaska State Legislature

Please enter into the record my testimony to the HESS
committee name
 committee on HCR-24, dated May 2, '91
bill/subject

The March 1991 issue of
 "The American Journal of Public Health"
 in an article entitled, "Impact of the
 Minnesota Parental Notification Law on
 Abortion and birth" states that the
 abortion rate fell 28% after the
 enactment of a parental notification law
 in Minnesota in 1981.

Please include studies from Minnesota
 and Illinois for they have spent years and

Signed: Ceralyn Oines
Testifier

Representing (Optional)
2414 HPR, Sitka, AK
Address
747-6732
Phone No.

Much money on the very issues Alaska
is concerned about now.
Thank you.

Coralyn Oines
Testimony Continued



Alaska State Legislature

Please enter into the record my testimony to the House
HESS, Finance
 committee name
 committee on HB 255, dated 5-2-91
 bill/subject

Being a Natural Helper isn't Always helping somebody. Sitka's Natural Helpers program is housed in the Sitka Teen Resource Center. It's a place to go to find help for yourself also. We address a lot of problems in school, such as sexual abuse, mental and physical abuse. If you have been kicked out of your house, etc... These common problems can lead to some very devastating outcomes. Being a Natural Helper you learn more things about yourself. You study warning signs for other problems and you feel like you were there for them when they need you.

Signed: Doug Helean
 Testifier
Sitka Natural Helpers - Sitka Teen Resource Center
 Representing (Optional)
805 Sistrud St.
 Address
7-8752
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House
HESS, Finance
 committee name
 committee on HB 255, dated 5-2-91
 bill/subject

Please See
 ATTACHED
 Testimony

Signed: Sharon Ramsay
 Testifier
Sitka Natural Helpers - Sitka Teen Resource Center
 Representing (Optional)
PO Box 1034 Sitka, AK
 Address
747-4884
 Phone No.

Sharon
Ramsay

I as a Natural Helper and Peer counselor encourage the spreading of this program to other parts of Alaska especially to the smaller villages. Personally I am called alot at home and pulled aside in the hallway and in the classroom and more so in the bathroom or at lunch time by my peers who are friends and acquaintances who need advice or a listening ear.

Problems vary - my main contact is with teens living on the edge, using and abusing drugs, very sexually active and are being abused at home.

Teens that think about suicide ending their lives due to home situation or pregnancy.

I have given advice that was very useful and I can say because of my knowledge and education from training at Natural Helpers meetings we have changed minds for the better for teens living on the edge.

Regarding teen pregnancies I need to say prevention is not going to be easy with out education. Maybe the Natural Helpers could have a day or a week at school to disperse into classrooms and inform peers on what they're really getting involved with chosidg to get pregnant or deciding on keeping the baby. Male & Female responsibilities and consequences that follow pregnancies.

Most importantly I've learned from myself and others that why we want babies is because we want to be loved and accepted. We want something of our own to nurture that no one can take away.

There's reasons for every decision we make.

Please consider the need for more education and permission for training in the area of pregnancies!



Alaska State Legislature

Please enter into the record my testimony to the House
HESS, ~~committee~~
 committee name
 committee on HB 255, dated 5-2-91
 bill/subject

My name is Gerald Sexton, I am a Natural Helper in Sitka, AK. Another important item I neglected to talk about was the "Contact Log" sheet that we use to keep track of the people we help. The log sheet runs the gamut from contacts with people requesting help about their parents beating them to people who just needed hugs. In all, the log sheets categorizes the contacts we have made and keeps track of the choices made by the helper as a result. For example if a girl comes up to me and asks my help regarding what she should do if she thought she might be pregnant. Myself, obviously not having a PhD in Biology, cannot do anything directly. Instead I would refer her to a doctor she could go to, or to Planned Parenthood. I would also advise her about the realities of getting pregnant: cost (\$2,000 - \$1,900 minimum), responsibility (immeasurable), and the time involved (time lost in school, work). Another important factor, especially if this hypothetical girl did become pregnant would be

Signed:

Gerald Sexton

Testifier

Sitka Natural Helpers - Sitka Teen Resource Center

Representing (Optional)

1/2 Box 1034 Sitka

Address

747-3500

Phone No.

to inform her in an unbiased, manner of some choices she could make and let her come to her own decision. Some choices could be natural birth, abortion or adoption. These days, abortion is a highly emotion topic and its important to make information readily available on both sides of the issue so a teen can make a decision based on information and not just emotions or other people's moral judgements.

Mike & Diana Grieser
9951 Steph. Rich. #57
Juneau, AK 99801

May 2, 1991

House of Representatives
HESS Committee
Juneau, Alaska

re: H.B. 268


Dear Committee Members:

We would like to express our profound opposition to H.B. 268, as we believe 'life' begins at conception and abortion is killing babies.

H.B. 268 liberalizes abortion laws that already are too liberal. We would appreciate legislation that protects the right to life for the unborn.

We encourage all members of this committee to vote against H.B. 268.
Thank you for your consideration of this matter.

Sincerely,


Diana R. Grieser

Phyllis Johnstone
11101 Magnolia
Anchorage, Alaska 99516

May 3, 1991

Georgianna Lincoln
State Representative
Chairman of HESS Committee

Dear Ms. Lincoln,

I believe House Bill No. 268 and Senate Bill No. 249 to be totally irresponsible legislation if what I have heard they are allowing for is true.

I do not agree with eliminating the requirement that abortions be performed by a physician or surgeon licensed by the State of Alaska.

To take away a doctor's or hospital's right to refuse to perform an abortion is unconscionable!

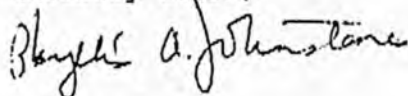
Counseling for alternatives to abortion should be mandatory rather than outlawed. I personally know a young woman who had an abortion when quite young and did not receive any counseling. In later years she learned that a baby was in the early stages of development and she was extremely guilt ridden. That naivete might sound unbelievable to us but it is very prevalent among youth and non-educated peoples.

I believe parental contact should be made for anyone under 18 seeking an abortion.

Tax dollars should not be used to pay for someone's moral irresponsibility in a second act of moral irresponsibility, the first being the unwanted pregnancy and the second being the killing of the fetus.

Enclosed please find a copy of what appear to documented facts on abortion.

Sincerely Yours,



Phyllis A. Johnstone

A few facts about abortion

It becomes increasingly tiring to listen to the armchair speculation concerning abortion. Let us list the facts;

- In a study conducted by Planned Parenthood, out of 73,000 legal abortions, there were 2,761 hemorrhages; 1,351 fevers; 747 pelvic infections; 607 hemorrhages and infections combined; 543 lacerations of the cervix; 187 punctures of the uterus and six deaths.

- Doe v. Bolton, U.S. Supreme court case in 1973, legalized abortion-on-demand during all nine months of pregnancy.

- Surveys performed by the U.S. government show that 20,000 women a year become sterile due to complications arising from legal abortions.

- Out of 486 doctors polled in the U.S., 87 percent said they had had to hospitalize

women due to serious complications after legal abortions.

- There were approximately 120,000 illegal abortions a year prior to national legalization in 1973. There have been approximately 120,000 illegal abortions a year since 1973.

- 1.5 million abortions are performed annually. 2 percent are performed for reasons of health or rape/molestation.

These are facts from pro-choice and government statistics. I am sorry if they seem to be one-sided; that is simply how they fall. Let us please dispense with the armchair speculation and popular opinion. Aside from allowing the man the right to kill, what has the legal action of abortion done for her? If you want the facts, they are right in front of you.

— Aharon W. Zorea

May 5 1991

To: Honorable Geogianna Lincoln
HESS Committee

I urge you to schedule a public hearing on HB 268. As elected officials, I am sure you recognize the controversial nature of the tragedy of the holocaust of our unborn children.

Personally, I oppose this radical abortion on demand bill. I would find it morally objectional for my tax dollars to fund the murder of our nations unborn children.

Please do your job as an elected representative and let the voices of your constituents be heard.

Sincerely,

Dana Swanson

Dana Swanson
10801 Glazanof Dr.
Anchorage, Ak. 995166

*Library
HB268*

May 6, 1991

Honorable Ben Grussendorf
House Speaker

Subject: HB 268

I urge you to have this bill reviewed by the Judiciary Committee. This is a controversial legal issue therefore it should be referred there.

I strongly oppose HB 268. I believe the tragedy of the holocaust of our nations unborn children must be stopped and that is why I oppose this radical abortion on demand bill!

Please consider why our country is in such moral decline. The right of a doctor or hospital to conscientiously object to participate in the killing of our children is horrific.

My tax dollars supporting this murder is against my rights.

These are just a few of the reasons I object to this bill.

Please do the right thing for America's people and properly process this bill.

Thank you,
Dana Swanson
Dana Swanson
10801 Glazanof Dr.
Anchorage Ak. 99516

M E M O R A N D U M

Library File

TO: HOUSE HESS MEMBERS
FR: PATTI, X4923
DT: MAY 8, 1991
RE: HB 268 -- NOTIFICATION OF PUBLICATIONS RECEIVED

THE TWO BOOKLETS MENTIONED BELOW HAVE BEEN RECEIVED BY THE HOUSE HESS COMMITTEE AND CAN BE FOUND IN THE LIBRARY FILE FOR HB 268 IN ROOM 106 OF THE CAPITOL BUILDING.

1. "WE AFFIRM" - NATIONAL RELIGIOUS ORGANIZATIONS' STATEMENTS ON ABORTION RIGHTS BY THE RELIGIOUS COALITION FOR ABORTION RIGHTS. 32 PAGES
2. "WORDS OF CHOICE" BY THE RELIGIOUS COALITION FOR ABORTION RIGHTS. 24 PAGES

THESE BOOKS ARE AVAILABLE FOR YOUR CONSIDERATION. IF YOU WOULD LIKE TO REVIEW THESE BOOKS, PLEASE LET US KNOW AND WE'LL BE HAPPY TO ROUTE THEM TO YOUR OFFICE.



RELIGIOUS COALITION FOR ABORTION RIGHTS

100 MARYLAND AVENUE, N.E. • SUITE 307 • WASHINGTON, D.C. 20002-5625
(202) 543-7032 • FAX (202) 543-7820

MEMBERS

American Ethical Union
National Science Conference
American Ethical Union
American Humanist Association
American Jewish Committee
American Jewish Congress
B'nai B'rith Women
Division of Homeland Ministries
Christian Church (Disciples of Christ)
Women's Caucus
Church of the Holy Spirit
Episcopal Urban Caucus
Episcopal Women's Caucus
Women in Mission and Ministry
The Episcopal Church
Women for Social Witness (Episcopal)
Federation of Reconstructionist
Congregations and Havurot
Lutheran Women's Caucus
Committee on Church and Society
Moravian Church in America
Northern Province
Na'amat USA
National Council of Jewish Women
National Federation of Temple
Sisterhoods
North American Federation of
Temple Youth
Committee of Women of Color
Presbyterian Church (U.S.A.)
Social Justice and Peacemaking
Ministry Unit
Presbyterian Church (U.S.A.)
Women's Ministry Unit
Presbyterian Church (U.S.A.)
Union of American Hebrew
Congregations
Unitarian Universalist Association
Unitarian Universalist
Women's Federation
Board for Homeland Ministries
United Church of Christ
Coordinating Center for Women
United Church of Christ
Office for Church in Society
United Church of Christ
General Board of Church and Society
United Methodist Church
Women's Division
General Board of Global Ministries
United Methodist Church
United Synagogue of America
Women's American ORT
Women's League for
Conservative Judaism
Women's Rabbinic Network

TESTIMONY SUBMITTED

to the

ALASKA HOUSE HEALTH EDUCATION AND SOCIAL SERVICES COMMITTEE

by

THE RELIGIOUS COALITION FOR ABORTION RIGHTS

on

THE PROPOSED LEGISLATION REPRODUCTIVE PRIVACY ACT, HB 268

April 24, 1991

HPX-20-51 170 12.88

The Religious Coalition for Abortion Rights is pleased to submit testimony to the Alaska legislature regarding a bill for an act providing for a woman's right to choose abortion without governmental interference, protecting the right to use birth control; relating to payment for abortions under Medicaid and general relief medical assistance; and providing for an effective date. We encourage you as legislators to support House Bill No. 268.

Contrary to common perception, religious doctrine does not speak with a single voice nor declare a single stand on the abortion issue. Each of the 35 national mainline Protestant, Jewish and other faith groups who comprise the Religious Coalition for Abortion Rights approaches the issue from the unique perspective of their own theology with members holding widely varying viewpoints as to when abortion is morally justified. Our coalitional members, who include among others Reform and Conservative Judaism and offices of the Methodist Church, the Presbyterian Church and the United Church of Christ, do not take the issue of abortion lightly. We hold in high regard both the value of potential life and freedom of choice.

The issue of abortion reveals sincere religious beliefs and intense religious differences. Religious views on the abortion issue range from the belief that abortion is an obligation if needed to preserve the life or well-being of the pregnant woman to the belief that abortion is a sin forbidden by divine authority. Within this spectrum are other views including that which promotes responsible parenthood and the preservation of the health and well-being of existing, living persons as among the highest religiously commanded obligations.

This plurality of beliefs in the religious community necessitates that the abortion decision must remain with the individual to be made on the basis of conscience and personal religious conviction, free from governmental interference. Our country's Bill of Rights that guarantees religious freedom to all, requires no less.

Many Protestant and Jewish faith groups have developed a rational and sensitive response to the abortion debate based on the following sound principles.

- o First, that in our pluralistic society, no one religious viewpoint on the beginning of human life should be imposed on all Americans by secular law.
- o Second, that abortion is a moral and theological concern, and that an abortion decision should be the result of thoughtful consideration, based on one's own conscience and religious beliefs.
- o Third, that there are some instances in which abortion may be a moral alternative to a problem pregnancy.

Beyond these sound principles, much diversity in doctrine and belief exists.

People of faith in the "pro-life movement" who are working for a Constitutional "human life" amendment to ban abortions argue that the Bible teaches: (1) that the fetus is a person from the moment of conception, and (2) that abortion is murder.

Roman Catholic theology requires baptism of the fetus after it has become "ensouled." The question of time of "ensoulment" has a long and varied history in the Roman Catholic Church. In the Middle Ages, following Aristotelian philosophy, it was assumed that a male fetus was ensouled after 40 days. The female fetus was ensouled at 80 days. In the 13th Century, St. Thomas Aquinas affirmed that upon conception the fetus is a vegetable, later evolving into an animal, and at two months, becoming human.

The present doctrine that life begins at the moment of conception and that abortion is murder is based on pronouncements of Pope Sixtus V in 1588, Pope Pius IX in 1869 and most recently on the 1968 encyclical of Pope Paul VI, "Humane Vitae." In the encyclical, Pope Paul declared that "directly willed and procured abortion, even if for therapeutic reasons (is) to be absolutely excluded as licit means of regulating birth." Under Canon 1398 of the Code of Canon Law, a woman who secures a completed abortion is automatically excommunicated regardless of the stage of pregnancy at the time of her abortion.

The Vatican position has been shared and endorsed by some religious groups. However, there is no unanimity regarding the status of the fetus, or the precise moment at which the product of conception becomes a person within both Jewish and Christian traditions. The question of when human life begins is a matter for

the religious conscience. Neither science nor the state can make this theological determination.

Within Jewish tradition, there is considerable agreement that the fetus is not a person until birth. Abortion, therefore, is permitted and indeed may be required in situations where the life of the mother is threatened. The Talmud, a collection of Jewish civil and religious laws, attributes humanity to the fetus only after the head has emerged from the birth canal. Legal codes and rabbinic teachings depict the fetus as part of a woman's body. A woman's life, her pain, and her physical and mental well-being take precedence over that of the fetus with the belief that full, realized life takes precedence over potential life. In Reform and Conservative Jewish teachings, abortion is not equated with the destruction of life. Beyond these points of virtual consensus, however, Orthodox Judaism, and different groups within each branch of Judaism hold divergent views about the circumstances under which abortion is permitted.

Some organized religious groups adhere to basic respect for individual conscience on abortion precisely because of the variety of views held by members of these groups. On this basis, the Presbyterian Church (USA) adopted a policy statement in 1983 at the 195th General Assembly and reaffirmed it in 1989 at the 201st Assembly. The position states that "The Presbyterian Church exists within a very pluralistic environment. Its own members hold a variety of views. It is exactly this plurality of beliefs that leads us to the conviction that the decision regarding abortion must remain with the individual, to be made on the basis of conscience and personal religious principles, free from governmental interference. Just as the decision to become a parent requires a responsible exercise of stewardship, reflecting moral and religious concerns, so does the decision to not become a parent." This Presbyterian approach emphasizes that God alone is Lord of the conscience, and that God gives each individual faced with a moral choice arising from sexual activity the power and the freedom to make moral choices regarding even the most serious questions.

Respect for individual conscience is the basis for the American Baptist Churches' position of abortion. Historically, abortion has been treated as a matter for individual conscience in keeping with the religion's foundation in individual voluntary baptism and commitment to responsible families and parenthood. In 1987, the General Board of the American Baptist Churches passed a resolution which declared, "We are divided as to the proper witness of the church to the state regarding abortion. Consequently, we acknowledge the freedom of each individual to advocate for a public policy on abortion that reflects his or her beliefs."

Other Protestant Churches have declared their support for a woman's choice regarding abortion because of potential risks to the

life or physical or mental health of the mother, because of

concerns about the social situation in which the infant might be born, and because of instances of severe deformity of the fetus. The United Methodist Church, for example, resolved in 1984 and reaffirmed in 1988 that "Our belief in the sanctity of unborn human life makes us reluctant to approve abortion. Be we are equally bound to respect the sacredness of the life and well-being of the mother, for whom devastating damage may result from an unacceptable pregnancy. In continuity with past Christian teaching, we recognize tragic conflicts of life with life that may justify abortion, and in such cases we support the legal option of abortion under proper medical procedures. We cannot affirm abortion as an acceptable means of birth control (contraceptive), and we unconditionally reject it as a means of gender selection."

The Episcopal Church USA reaffirmed its support for women's rights over their own bodies at its 1988 General Convention. They urged "that any proposed legislation on the part of national or state governments regarding abortions must take special care to see that individual conscience is respected, and that the responsibility of individuals to reach informed decisions in this matter is acknowledged and honored."

In 1971, the United Church of Christ's Board of Homeland Ministries and the Center for Social Action called for freedom of choice concerning abortion, stating that "The theological and scientific views on when human life begins are so numerous and varied that one particular view should not be forced on society through its legal system. Present laws prohibiting abortion are neither just nor enforceable." In 1987, the Sixteenth General Synod of the United Church of Christ, "while recognizing (abortion's) moral ambiguity and urging that alternatives to abortion always be fully and carefully considered," upheld "the right of women to have . . . safe, legal abortions as one option among others." The synod also urged pastors, members and local churches "to oppose actively legislation and amendments which seek to revoke or limit access to safe and legal abortions."

There is no consensus within the religious community on the issue of abortion. There is no agreement on the question of when life begins. We hope, though, there can be some agreement and respect among Protestant, Catholic and Jewish faith groups to accept the diversity of beliefs on the issue of abortion in the context of religious freedom.

We applaud Alaska legislators for omitting any reference to the issue of parental consent and/or notification in this legislation. The issue of parental consent and/or parental notification is a very difficult issue for the Religious Coalition for Abortion Rights and our coalition members. RCAR and the religious community wholeheartedly agrees that parents should be

involved in the decisions of their children.. We recognize that most families are strong and supportive of their children and share and communicate effectively with their children.

However, RCAR also recognizes that it is impossible to legislate communication, love understanding and compassion. RCAR also recognizes that for far too many pregnant minors, parental consent and/or notification would place pregnant minors at serious risk. These risks include physical or mental abuse from one parent or both, including harm from the parent who caused the pregnancy.

While judicial bypass has often been offered as a method of reducing the harsh burden of parental consent and/or notification laws, it should be noted that such a provision still impedes access and is not an alternative to those persons who are not able to effectively communicate with court judges. More important, the issue of equity is not addressed with the adoption of judicial bypass provision. Far too many poor women and women living in rural areas do not have equal access to court systems to even exercise their rights under judicial bypass provisions. We applaud Alaska legislators for omitting any reference to the issue of parental consent and/or notification in this legislation.

Conclusion: The 35 member faith groups of the Religious Coalition for Abortion Rights find intolerable the actions of individuals and organizations to ban abortions by enacting into secular law one theological belief on the beginning of life either directly or indirectly. These efforts would prohibit the free exercise of religion to those whose beliefs allow -- and in some cases require -- abortion to be considered as a moral choice. Millions of Americans who do not share the narrow anti-choice theological view would not be able to make decisions according to the teachings of their own faith. Millions of Americans would be denied their religious freedom.

For centuries, the abortion question has not been an easy one for theologians, church groups, and people of faith. But we believe people of faith have been wise and compassionate in their judgment that the abortion decision must be available to the people, to be made with the freedom of their own conscience and religious principles and without government intervention.

We hope, however, that as a legislator bound to uphold our nation's laws, you will respect this religious diversity and maintain an individual's right to religious freedom.

Alaska State Legislature

Legislative Research Agency



P.O. Box Y
Juneau, AK 99811-3100
Phone: (907) 465-3891
Fax: (907) 463-3351

DRAFT

April 24, 1991

MEMORANDUM

TO: Representative Niilo Koponen

FROM: Gordon S. Harrison, Director *(gsh)*

RE: Analysis of CSHB 268
Research Request 91.268

You requested a sectional analysis of HB 268 ("Reproductive Privacy Act") prior to a committee hearing on the bill Thursday morning, April 25. A committee substitute for HB 268 became available late in the afternoon today. At this late date, all I can attempt to do in this memorandum is offer a brief overview of each section of the committee substitute and point to aspects of the bill that raised questions on a first reading.

Sections 1, 5 and 6

Section 1 provides intent language for sections 5 and 6 of the bill. Its purpose is to help courts and administrators resolve any disputes that may arise in the future over the interpretation of those sections.

Section 5 allows a woman to receive an abortion under the Medicaid program if she is eligible for Medicaid and if the pregnancy threatens her life. The section specifies that the Department of Health and Social Services shall pay for an abortion for a needy woman under the Medicaid program if the abortion qualifies under federal law, and it shall pay under the fully state-funded General Relief Medical program if the abortion does not. Federal regulations currently allow Medicaid abortions only to save the life of the woman (in the past federal law also permitted Medicaid abortions when the pregnancy was the result of rape or incest). Abortions for needy women who qualify and who seek an abortion for reasons other than life endangerment (and therefore do not fall under federal guidelines) are funded under the General Relief Medical program. This section recognizes in statute the current practice of the department.

Section 6 amends the statutes dealing with the General Relief Medical program to make it clear that abortions, of both a "therapeutic" and "elective" nature, for needy women are covered by the General Relief Medical program. This section, too, recognizes current state practice.

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Section 2

Section 2 of the bill amends the current statute (AS 18.16) dealing with abortions. It adds several substantive sections to the statute. Because Section 7 of the bill repeals the existing content of the statute (AS 18.16.010; attached), these new sections become the entire content of the amended law. That is, these new sections must be read with the understanding that they do not add to but replace the existing provisions in section 010.

AS 18.16.020

This section declares a general right to privacy on the part of women regarding childbirth. The specific legal effects of this policy statement are not clear, but its general effect is presumably to resolve ambiguities that surface later in favor of the unfettered choice of women in matters regarding childbirth and reproduction.

The word "commence" in this section (and elsewhere in the bill) may be noteworthy as a policy matter insofar as it could conceivably interfere with future efforts of the legislature to regulate surrogate parenting or to authorize the courts to impose contraception on alcoholic women with a history of producing children with fetal alcohol syndrome, for example.

AS 18.16.030

This section is a sweeping prohibition against interference by the state in a woman's choice to get pregnant, stay pregnant, or to end her pregnancy by abortion. The "state" includes an "instrumentality of the state", such as a public corporation, a school district, or the State Medical Board, and a "political subdivision of the state", such as a municipality.

The only restrictions on "medically appropriate" abortions that the bill tolerates are certain regulations that may be adopted by the Department of Health and Social Services (DHSS) and the State Medical Board, which are discussed below.

The definition of "medically appropriate" provided by the bill in AS 18.16.090 states that the method must be "medically safe", or "recommended by a physician in the good faith exercise of the physician's best professional judgement", as these things are "regulated by generally accepted standards, licensing requirements for medical facilities, or laws governing the prescription of drugs or medical devices." This somewhat awkward definition would seem to open the door to use in the future of such methods as the French abortion pill RU 486.

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AS 18.16.040

Provisions under AS 18.16.040 in the bill authorize what would appear to be minimal regulation of abortions by DHSS and the State Medical Board. The two subsections (a) and (b) distinguish between allowable regulation of abortions performed before the "point of fetal viability" and after that point, but neither, *prima facie*, seems to interfere substantially with the opportunity of obtaining a legal abortion. This contrasts with regulations in many states which curtail legal access to abortions after the point of fetal viability.¹

The bill states that regulations pertaining to abortions before and after the point of fetal viability must be "consistent with established medical practice." Generally speaking, abortions after the fetus has reached the point of sustained viability outside the mother's womb are performed only in exceptional circumstances--the fetus has a defect that is incompatible with life, or the pregnancy threatens the life of the mother. Perhaps this "established medical practice" would find its way into regulation under this provision.

The "point of fetal viability" is defined in 18.16.090 of the bill as the point at which "there is a reasonable likelihood of sustained survival of the fetus outside the woman's uterus, with or without artificial aid." My understanding of these matters is that there is at least some likelihood of survival with heroic medical intervention at about 20 weeks of pregnancy. Thus, it is at approximately this point of gestation that one set of regulations would give way to the next, although the determination of viability in specific cases is to be left entirely up to the "professional judgement of the woman's physician" (AS 18.16.040 (b)(1)).

Noteworthy about regulations that pertain to abortions before fetal viability is that they may not "delay, increase the cost of, or limit the availability of an abortion" (AS 18.16.040 (a)(4)). This constraint is a significant one, because it is hard to imagine many regulations that would not arguably have these effects.

The phrase "increase the cost of" is omitted from the list of prohibited impacts of regulations permissible after fetal viability (AS 18.16.040 (b)(5)); but the phrase "limit the availability of abortion" remains. It would not be hard to find an economist who would argue that increasing the cost of something

¹The U.S. Supreme Court decision in *Roe v. Wade* did not prohibit abortions after fetal viability. A summary of the Court's ruling said: ". . . subsequent to approximately the end of the first trimester the state may regulate abortion procedure in ways reasonably related to maternal health, and at the stage subsequent to viability the state may regulate and even proscribe abortion except where necessary in appropriate medical judgment for preservation of life or health of mother." (*Roe v. Wade* 03 S.Ct.705 [1973]).

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limits its availability. Therefore, the significance of the omission may not be great.

A provision of this section that distinguishes allowable regulation of abortion after fetal viability from allowable regulation before fetal viability is the requirement that the regulation be "designed to protect the health of the fetus without impairing or risking the impairment of the life or health of the woman undergoing the abortion" (AS 18.16.040 (b)(2)). If the health of the fetus is to be protected, the abortion is no longer an abortion in common parlance. It becomes a premature delivery of some kind. Indeed, survival of the fetus would seem to defeat the purpose of most abortions.

AS 18.16.050

Subsection (a) is included to prevent a state or municipal agency from asserting independent authority to regulate abortions (such as a local ordinance authorizing the exercise of health powers, for example).

Subsection (b) indicates that only physicians are to perform abortions. Abortions are a medical procedure, and they are recognized as such by the bill. In indirect fashion this provision replaces AS 18.16.010 (a)(1) in current law, which would be repealed by the bill.²

AS 18.16.090

This section offers definitions of "interfere with," "medically appropriate," "pregnancy," and "viability."

Section 3

This entire section has the simple purpose of amending the licensing statutes for doctors by including in the grounds for imposition of disciplinary sanctions in AS 08.64.326 a violation of a regulation adopted by DHSS or the State Medical Board under AS. 18.16.040.

Section 4

The effect of this section is to clarify that parental consent is not required by a minor seeking an abortion. An opinion of the attorney general has found

²AS 18.16.010 states "(a) An abortion may not be performed in this state unless (1) the abortion is performed by a physician or surgeon licensed by the State Medical Board under AS 08.64.200."

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current statutory language requiring parental consent (AS 18.16.010 (3)) to be unconstitutional.

Section 7

This section of the bill repeals two existing statutory provisions: AS 08.64.105 and AS 18.16.010.

AS 08.64.105 authorizes the State Medical Board to adopt regulations implementing AS 18.16.010 and otherwise set standards for the performance of abortions. This provision would be replaced by AS 18.16.040 in the bill. Existing regulations adopted pursuant to this provision, 12 AAC 40.060-140, would be nullified.

The only provision of AS 18.16.010 that CSHB 268 seems to continue is the requirement that abortions be performed by licensed physicians. The remaining provisions are dropped (or explicitly reversed). Thus, DHSS would no longer be directed to approve facilities that perform abortions; there would be no durational residency requirement (which is of dubious legality); consent would not be required for minor women (which is also of legal suspect); and there would be no explicit liability protection for a medical practitioner who chose not to participate in an abortions.

Section 8

This section provides the effective date clause.

Alaska State Legislature

Legislative Research Agency



P.O. Box Y
Juneau, AK 99811-3100
Phone: (907) 165-3991
Fax: (907) 163-3351

April 23, 1991

MEMORANDUM

TO: Representative Niilo Koponen

FROM: Maureen Weeks ^{MW}
Legislative Analyst

RE: State-Funded Abortions in Alaska
Research Request 91.260

You asked for information about state-funded abortions for Alaskans. The first part of this memorandum provides statistics about abortions funded from 1988 to 1990 under the state's public assistance programs for low-income people. The second part lists the source of state funds for abortion.

State-Funded Abortions: 1988-1990

The attached tables show state-funded abortions over the three-year period 1988-1990. Tables 1 through 4 analyze state-funded abortions by the pregnant woman's age and race, by whether the abortion was performed in or out of Alaska, and finally, by cost to the state.¹

In summary, the tables show that between 1988 and 1990, the state funded an average of 606 abortions per year, at an average cost of \$552 per abortion (not counting transportation). Very few of these state-funded abortions were performed outside Alaska. The state paid for only two out-of-state abortions in 1988, nine in 1989 and 51 in 1990.

More than half of state-funded abortions between 1988 and 1990 were for women aged 22-30 and one third more were for women aged 13-21. More than half were for white women and almost one-third more were for Native women. Almost one-fifth of abortions were for women of other races. (To compare, white women make up 77 percent of the state's female population of childbearing age, while Native women make up 14 percent and women of other races account for less than five percent.)

¹The tables combine three years in an effort to provide a larger sample and avert statistically unreliable variations which can be caused by small numbers.

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This racial mix among recipients of state-funded abortions is not unlike the mix in Medicaid and other assistance programs, where minority races are represented at rates higher than their rate in the total population. For example, comparing Alaskans who received Food Stamps in March 1991 with Alaskans who received state-funded abortions between 1988 and 1990 shows that whites received 57.6 percent of Food Stamps and 51 percent of state-funded abortions. Natives received 36.9 percent of Food Stamps and 31.6 percent of state-funded abortions.²

Source of Funds

In Alaska, state funds are used to pay for abortions for low-income pregnant women who receive public health assistance through the state's Medicaid or General Relief Medical programs.³ Abortions are paid for from these two funds.

Medicaid uses both state and federal money to pay providers who care for eligible, low-income Alaskans. Generally, the state pays about half the cost of health care under Medicaid and the federal government pays the other half. This is not the case for abortions for low-income women, however. By regulation, federal Medicaid money may be used to abort only those pregnancies which threaten the life of the pregnant woman.

In Alaska, other abortions for qualifying low-income pregnant women are funded through the state General Relief Medical program. This program uses state money to pay providers for the cost of emergency health care for participants; it does not use federal funds. Recipients are eligible for one month only; those who need additional medical care at the end of a month must submit a new application.

I hope this information is useful to you. Please call me if you have any questions.

Attachments

²Statistics provided by Division of Medical Assistance, Alaska Department of Health and Human Services.

³Low-income pregnant women are eligible for both state and federal Medicaid funds. Others eligible for Medicaid include people who receive money from Aid to Families with Dependent Children, Old Age Assistance, Aid to the Blind, Aid to the Disabled and the federal Supplemental Security Income program. The General Relief Medical program covers poor adults who do not qualify for Medicaid because they do not meet the "categorical" requirement of Medicaid, such as blindness, disability and being older than age 65.

TABLE 1
State-Funded Abortions by Age of the Client, FY 88-90

	<u>13-16 yrs.</u>	<u>17-21 yrs.</u>	<u>22-30 yrs.</u>	<u>30+ yrs.</u>
Total number 1988-90	79	531	926	282
Percent of all state-funded abortions	4.4	29.0	51.0	15.5
Average number per year	26	177	309	94

Source: Division of Medical Assistance, Alaska Department of Health and Social Services, 1991.

TABLE 2
State-Funded Abortions by Race of the Client, FY 88-90

	White	AK Native	Other
Total Number, 1988-90	925	575	318
Average per year	308	192	106
Percent of all state-funded abortions	51.0	31.6	17.5
Percent of all Food Stamps recipients, March 1991	50.6	36.9	12.5

Source: Division of Medical Assistance, Alaska Department of Health and Social Services and Alaska Department of Labor.

Prepared by the Legislative Research Agency, April 1991 (91.260A).

TABLE 3
State-Funded Abortions Inside and Outside Alaska, FY 88-90

<u>Year</u>	<u>In-state</u>		<u>Out-of-State</u>	
	<u>No.</u>	<u>%</u>	<u>No.</u>	<u>%</u>
1988	461	99.6	2	.4
1989	720	98.8	9	.2
1990	<u>575</u>	91.8	<u>51</u>	8.2
Total	1,756	96.6	62	3.4

Source: Division of Medical Assistance, Alaska Department of Health and Social Services, 1991.

TABLE 4
Cost of State-Funded Abortions, FY 88-90 (1)

<u>Year</u>	<u>Abortions</u>	<u>Total Cost</u>	<u>Cost/Abortion</u>
1988	463	\$210,008	\$453.58
1989	729	\$423,111	\$580.39
1990	626	\$370,507	\$591.86
Total, 1988-90	1,818	\$1,003,626	\$552.05

Source: Division of Medical Assistance, Alaska Department of Health and Social Services, 1991.

(1) Cost does not include transportation.

Prepared by the Legislative Research Agency, April 1991 (91.260B).

7 AAC 43.140. ABORTIONS. (a) Payment for abortions may be covered under medicaid when the physician services invoice is accompanied by certification that one of the following conditions exists:

(1) the life of the mother would be endangered if the pregnancy were carried to term;

(2) severe and long-lasting physical health damage to the mother would result if the pregnancy were carried to term; or

(3) pregnancy is the result of rape or incest.

(b) Procedures which are not covered under this section will be covered under General Relief Medical, 7 AAC 47. (Eff. 8/18/79, Register 71)

Authority: AS 47.05.010
AS 47.07.030
AS 47.07.050

7 AAC 43.825. PROGRAM. Family planning services will be covered by medicaid when provided by family planning clinics under the Division of Public Health, local health departments, student health services, private family planning clinics, or private physicians. Drugs, supplies, devices, and medical procedures provided by a physician or under physician supervision will be covered under this chapter. (Eff. 8/18/79, Register 71)

Authority: AS 47.05.010
AS 47.07.050

7 AAC 43.835. DEFINITION. In 7 AAC 43.825 — 7 AAC 43.835, "family planning services" refers to those services and materials provided with the purpose of postponing, avoiding, or terminating pregnancy, including the dispensing of birth control drugs and devices for males and females, and the performance of vasectomies, sterilizations, and abortions for the purpose of avoiding or terminating pregnancy. (Eff. 8/18/79, Register 71)

Authority: AS 47.05.010
AS 47.07.050

Medicaid - General Relief Medical Regs

7 AAC 47.210. EXCLUSIONS FROM GENERAL RELIEF MEDICAL PROGRAM. Notwithstanding any other provisions contained in this chapter or 7 AAC 43, a payment may not be made under the General Relief Medical program for any expense

- (1) that is for major medical care not determined necessary by the professional review organization on contract with the division of medical assistance;
- (2) that is for nursing home care not approved by the division of medical assistance;
- (3) for items and services not properly prescribed or determined necessary by a health care practitioner;
- (4) for more than 12 outpatient physician visits by a recipient in a calendar year;
- (5) for outpatient physician visits that are not for a recipient with a diagnosis as described in 7 AAC 47.271(b);
- (6) if persons are in the care and custody of penal facilities, including juveniles in detention facilities;
- (7) for an elective procedure other than a pregnancy-related service as defined in 7 AAC 47.290;
- (8) if the expense is for the first \$50 of each day of hospital stay up to a maximum of \$200 per hospital admission for major medical care;
- (9) if the expense is for a prescription drug or prescribed medical supply for a recipient who does not have a diagnosis specified in 7 AAC 47.271(b);
- (10) repealed 7/1/87.

(Eff. 3/23/78, Register 65; am 5/2/79, Register 70; am 4/15/82, Register 82; am 5/25/82, Register 84; am 8/1/86, Register 99; am 11/28/86, Register 100; am 7/1/87, Register 103)

Authority: AS 47.50.010
AS 47.25.170

7 AAC 47.200. GENERAL RELIEF MEDICAL COVERAGE. The General Relief Medical program provides payment on behalf of needy persons who are eligible under the provisions of this chapter for any of the following services:

- (1) major medical care as defined in 7 AAC 47.290;
- (2) skilled nursing home care;
- (3) intermediate nursing home care;
- (4) physician services if
 - (A) related to major medical care provided in a hospital on an inpatient basis;
 - (B) provided in a hospital emergency room the same day on which the recipient is admitted for major medical care;
 - (C) provided to a recipient residing in a nursing home;
 - (D) provided in either an outpatient or an inpatient setting to a recipient with a diagnosis described in 7 AAC 47.271(b); or
 - (E) provided for pregnancy-related services;
- (5) outpatient laboratory and x-ray services provided in conjunction with pregnancy-related services or nursing home care;
- (6) medical transportation related to major medical care, nursing home care, or pregnancy-related services;
- (7) outpatient surgical center services provided in conjunction with pregnancy-related services or nursing home care;
- (8) prescribed drugs and medical supplies for a recipient with a specific diagnosis as described in 7 AAC 47.271(b);
- (9) repealed 7/1/87.

(Eff. 3/23/78, Register 65; am 5/2/79, Register 70; am 5/17/82, Register 82; am 5/25/82, Register 82; am 9/23/84, Register 91; am 8/1/85, Register 95; am 8/1/86, Register 99; am 11/28/86, Register 100; am 7/1/87, Register 103)

Definitions
applic. to
Gen. Relief Medical

7 AAC 47.290. DEFINITIONS. In 7 AAC 47.010 — 7 AAC 47.290

(1) "prescribed drug" means a simple or compound substance, or mixtures of substances, prescribed for the cure, mitigation, or prevention of disease, or for health maintenance that is prescribed by a physician or other licensed practitioner of the healing arts within the scope of practice as defined and limited by federal and state law,

and is dispensed by a licensed pharmacist on a valid prescription that is recorded and maintained in the pharmacist's records;

(2) "disabled" or "disability" means being unable to or the inability to engage in substantial gainful activity by reason of a medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than 12 months;

(3) "elective procedure" means a procedure that is subject to the choice or decision of the patient or physician regarding medical services that are advantageous to the patient but not necessary to prevent the death or disability of the patient;

(4) "major medical care" means non-elective inpatient hospital services that cannot be performed on an outpatient basis and that are certified as necessary by the professional review organization contracted by the division of medical assistance;

(5) "pregnancy-related service" or "pregnancy-related services" means a service or services reasonably necessary for an abortion;

(6) "recipient" means an individual who is financially eligible for General Relief Medical assistance and who may receive a covered medical service if determined to be eligible to receive the service. (Eff. 8/1/85, Register 95; am 12/4/85, Register 96; am 8/1/86, Register 99; am 11/26/86, Register 100)

Authority: AS 47.05.010
AS 47.25.120
AS 47.25.170

DIVISION OF LEGAL SERVICES

LEGISLATIVE AFFAIRS AGENCY STATE OF ALASKA

P.O. Box Y, Juneau, Alaska 99811
(907) 465-3867 or 465-2450
FAX (907) 465-2029

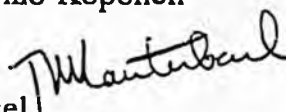
Deliveries to: 240 Main Street
Court Plaza, Room 500
Mail Stop 3101

MEMORANDUM

April 23, 1991

SUBJECT: Reproductive Privacy Act
CSHB 268(); 7-LS0791\J (4/22/90)

TO: Representative Niilo Koponen

FROM: Terri Lauterbach 
Legislative Counsel

CSHB 268() clarifies a number of provisions in the original bill.

AS 18.16.030 and 18.16.040 are rewritten in this CS to clarify that the state can regulate (within limits), but not prohibit, abortions that are performed after the point of fetal viability. The original bill was not as clear as it could have been on this matter.

AS 18.16.040(a) is modified so that it applies only to abortions performed before fetal viability. A new subsection is added at AS 18.16.040(b) to apply to abortions performed after fetal viability. The authority of the State Medical Board to adopt regulations has been added to both subsections; the board would be bound by the same limitations that are placed on regulations of the Department of Health and Social Services.

In addition, the CS adds a new section at AS 18.16.050 to clarify the relationship between the laws that would be enacted by this bill and other laws. AS 18.16.050(a) clarifies that other laws could not be used to justify abortion regulations. This subsection, or something like it, is advisable if you want to prevent agencies or political subdivisions from pointing to other laws as independent authority for abortion regulation. For instance, DHSS has broad authority under other laws to protect health and license hospitals, and the State Medical Board has broad authority relating to the practice of medicine. Local boards of health also have broad health authority. The intent of this new subsection is to make it clear that these other sources of authority could not be used for regulating abortions.

AS 18.16.050(b) clarifies that this bill is not intended to allow a nonphysician to perform an abortion if the abortion procedure is within the practice of medicine.

Legal Services memo re changes in CSHB 268()

Representative Niilo Koponen

April 23, 1991

Page 2

Since the original bill prohibited regulations that would make an abortion more expensive, it arguably would have prohibited a requirement that a physician be used for an abortion procedure that is within the practice of medicine. On the other hand, this subsection would not require use of a physician if an abortion method is available that does not fall within the practice of medicine. (I'm not sure what that method might be, but technologies are always changing.)

Sec. 4 is clarified by adding "termination" in paragraph (4). "Treatment" of pregnancy arguably already includes an operation to terminate the pregnancy, but the addition of "termination" makes this crystal clear. New language is also added at the beginning and the end of paragraph (4) to clarify that a minor can give consent to the services covered by paragraph (4) without parental contact. Paragraph (4), as a more specific provision than paragraph (2), would most likely be construed to supersede paragraph (2) even without the added language; the added language just makes it more clear.

I hope this explanation of the changes is helpful to you. If I can be of further assistance on this matter, please let me know.

TML:pl
91-292.plm

Alaska State Legislature
Representative Niilo Koponen

Pouch V
Juneau, Alaska 99811
(907) 465-4992

House District 21

119 N. Cushman, Suite 207
Fairbanks, Alaska 99701
(907) 456-8172

SPONSOR STATEMENT

House Bill 268

"An Act providing for a woman's right to choose abortion without governmental interference; protecting the right to use birth control; relating to payment for abortions under Medicaid and general relief medical assistance; and providing for an effective date."

As state legislators, we are committed to the enactment of laws that enhance democracy and promote constitutional values. Freedom of choice is an important right of privacy. I believe in equality before the law and will not support any legislation that can only be enforced against women.

House Bill 268 declares that an individual decision to commence, prevent, continue or terminate a pregnancy is a matter of profound personal choice. It would clearly pronounce that the public policy of the State of Alaska is to prevent governmental interference with both the rights of all individuals to use birth control and the rights of all women to choose childbirth or to obtain a safe and legal abortion. This bill permits the Department of Health and Social Services to adopt regulations relating to abortion only if those regulations (1) are designed to protect the life or health of a woman undergoing an abortion; (2) constitute the least restrictive means of furthering the state's interest in the woman's life or health; (3) are consistent with established medical practice; and (4) do not delay, increase the cost of, or limit the availability of an abortion. Further, the Department shall pay for abortion procedures to the extent permitted under federal law.

Reproductive privacy, including abortion, is a matter of individual conscience, not governmental coercion. Reproductive choices of Alaskans must be protected by law.

Sponsor Statement

Representative Nillo Koponen
Floor Speech
How Public Policy Should be Made
April 10, 1991

Last Monday I attended one of the hearings on confirmation and the co-chair of that committee asked the commissioner-elect what his position was in regard to the issue of abortion and whether he was going to carry out the existing laws.

The commissioner said that they were going to reconsider the use of general relief medical funds and to try to develop a policy that would encourage people to put their unwanted children up for adoption rather than paying for abortion for low income women. This is a very private kind of decision. I cannot imagine anyone going into it with any pleasure. I don't even like to go to the dentist and a medical procedure like an abortion is something one does not undertake lightly.

The commissioner went on to say that they were looking to come into line with a stated intent of the President of the United States (which is not incidently public policy by federal law, nor is it in line with the public policy as stated in *Rowe vs. Wade* by the Supreme Court of the United States). This kind of policy, if it were adopted unilaterally, by regulation, by the department, would be discriminatory in two ways. For one thing it would be in directed only against women and for another thing it would subdivide that class of human beings into two; the well to do and the poor. It would discriminate solely against poor women. I cannot believe that really had been the thought of the commissioner himself if he really thinks the question through.

But the major problem from the viewpoint of this House is that public policy is determined by law, by the statutes we write and by the budgets we write. We have put money into general relief medical with the intent that those services would be available and any other medical services that are needed by women who cannot otherwise afford them. I think that to even contemplate unilaterally without the concurrence of the legislature expressed in statute, this sort of easing away from the constitutional powers of the legislature, this sort of creating essentially a system of administrative government, essentially a modern type of czarism, is unconscionable and I don't think we should stand for it.

I would like to invite those of you who are interested in signing on to the legislation on this matter that was submitted today.

Thank you.



Alaska State Legislature

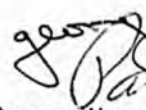
HOUSE OF REPRESENTATIVES

Official Business

P.O. Box V
State Capitol
Juneau, Alaska 99811

MEMORANDUM

TO: House HESS Committee Members

FROM: Representative Georgianna Lincoln, Co-Chair
Representative Pat Carney, Co-Chair
House Health, Education and Social Services Committee 

DATE: May 16, 1991

RE: CS HB 268 () - Reproductive Privacy Act

Attached is a memo we received from Rep. Niilo Koponen requesting we distribute the attached proposed CS for HB 268 to each member of the HESS Committee since we will not have time to address the bill this session.

Alaska State Legislature
Representative Niilo Koponen

Pouch V
Juneau, Alaska 99811
(907) 465-4992

House District 21

119 N. Cushman, Suite 207
Fairbanks, Alaska 99701
(907) 456-8172

M E M O R A N D U M

To: Representative Georgianna Lincoln and Representative Pat Carney
Co-Chair's House Health Education and Social Services Committee

From: Representative Niilo Koponen 

Re: HB 268 "Relating to Reproductive Privacy"

Date: May 13, 1991

I respectfully request that the House Health, Education and Social Services Committee review and adopt the current Committee Substitute for HB 268 before the close of the legislative session.

Due to the controversial nature of this legislation and the impending close of the session, members of the Legislature will soon return to their home districts and be questioned on this. The current CS will answer many of those questions. If legislators have the current adopted CS, they should feel more at ease when they meet with their constituents. It is for this reason that I urge you to adopt the CS or at a very minimum, distribute the CS to your committee members for their information and review.

Thank you for your attention to this matter.

7-LS0791P ✓
Lauterbach
4/30/91

CS FOR HOUSE BILL NO. 268 ()
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY

Offered:

Referred:

Sponsor(s): REPRESENTATIVES KOPONEN, Boyer, Ellis, Finkelstein, Lincoln, C.Davis, Donley, Moyer, Navarre, Ulmer, Gruenberg, Brown, Bruckman

A BILL

FOR AN ACT ENTITLED

1 "An Act providing for a woman's right to choose abortion without undue governmental
2 interference; protecting the right to use birth control; relating to medical services provided
3 to minors; relating to payment for abortions under Medicaid and general relief medical
4 assistance; and providing for an effective date."

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

6 * Section 1. INTENT. The intent of AS 47.07.067 and AS 47.25.197, enacted by secs. 5 and 6 of
7 this Act, is to confirm that statutes in effect on the day before enactment of this Act require payment
8 for abortion services under AS 47.07 (Medicaid program) and AS 47.25.120 - 47.25.300 (general relief
9 medical assistance). AS 47.07.067 and AS 47.25.197 are intended to continue the already required
10 practice of paying for abortions to the extent that they were paid for under AS 47.07, AS 47.25.120 -
11 47.25.300, 7 AAC 43.140, 7 AAC 43.825, 7 AAC 43.835, 7 AAC 47.210(7), 7 AAC 47.200(4)(E),
12 7 AAC 47.290(3) and (5), and related regulations, as they were in effect on April 10, 1991.

13 * Sec. 2. AS 18.16 is amended by adding new sections to read:

14 Sec. 18.16.020. DECLARATION OF PUBLIC POLICY. The legislature finds and

1 declares that an individual decision to commence, prevent, continue, or terminate a pregnancy
2 is a matter of profound personal choice. It is the public policy of the state to prevent
3 governmental interference with the rights of all individuals to use birth control and the rights of
4 all women to choose childbirth or to obtain a safe and legal abortion, as described in this chapter.

5 Sec. 18.16.030. PROTECTION OF REPRODUCTIVE CHOICE. (a) Except as provided
6 in AS 18.16.040 and 18.16.050, the state, an instrumentality of the state, or a political subdivision
7 of the state may not interfere with a woman's personal choice to commence, prevent, continue,
8 or terminate a pregnancy.

9 (b) The state, an instrumentality of the state, or a political subdivision of the state may
10 not interfere with the use of medically appropriate methods of contraception or abortion or the
11 manner in which medically appropriate methods of contraception or abortion are provided.

12 Sec. 18.16.040. REGULATIONS. (a) The Department of Health and Social Services
13 and the State Medical Board may adopt regulations relating to abortions performed before the
14 point of fetal viability but only if the regulations

15 (1) protect the life or health of a woman undergoing an abortion;

16 (2) constitute the least restrictive means of furthering the state's interest in the
17 woman's life or health;

18 (3) are not inconsistent with established medical practice; and

19 (4) do not delay, increase the cost of, or limit the availability of an abortion.

20 (b) The Department of Health and Social Services and the State Medical Board may
21 adopt regulations relating to abortions performed after the point of fetal viability, but only if the
22 regulations

23 (1) leave the determination of viability completely within the professional
24 judgment of the woman's physician and do not interfere with the exercise of that judgment;

25 (2) protect the health of the fetus without impairing or risking the impairment of
26 the life or health of the woman undergoing the abortion;

27 (3) constitute the least restrictive means of furthering the state's interest in the
28 health of the woman and the fetus;

29 (4) are not inconsistent with established medical practice; and

30 (5) do not delay, prohibit, or limit the availability of abortion.

31 Sec. 18.16.050. PHYSICIAN REQUIREMENT. (a) A person may not perform an

1 abortion in this state unless the person is licensed as a physician under AS 08.64.200.

2 (b) Violation of this section is a class C felony.

3 (c) This section does not apply to the woman upon whom the abortion is performed.

4 Sec. 18.16.060. REFUSAL TO PERFORM ABORTION; REFERRAL. (a)

5 Notwithstanding other provisions of this chapter, a physician, nurse, or other individual may
6 refuse to participate in the performance of an abortion if the refusal is based on conscientious or
7 religious beliefs.

8 (b) A physician who refuses to perform an abortion for a woman who has consulted the
9 physician about having an abortion shall refer the woman to another health care provider in
10 accordance with professional standards.

11 Sec. 18.16.070. APPLICABILITY OF OTHER LAWS. (a) This chapter constitutes the
12 only authority under which the state, an instrumentality of the state, or a political subdivision of
13 the state may regulate abortions. To the extent that other laws of this state authorize regulations
14 that may affect abortions, those laws shall be construed to be limited by this chapter.

15 (b) This chapter may not be construed to authorize the unlicensed practice of medicine.

16 Sec. 18.16.090. DEFINITIONS. In this chapter,

17 (1) "interfere with" includes restrict, infringe, prevent, impede, prohibit, limit,
18 penalize, burden, or engage in an activity, whether intentional or unintentional, that creates a
19 disparate treatment or adverse effect;

20 (2) "medically appropriate" means generally recognized as medically safe and
21 effective or recommended by a physician in the good faith exercise of the physician's best
22 professional judgment, as regulated by generally accepted standards, licensing requirements for
23 medical facilities, or laws governing the prescription of drugs or medical devices;

24 (3) "pregnancy" means the reproductive process beginning with the implantation
25 of a fertilized ovum in the uterus;

26 (4) "viability" means the point at which, in the professional judgment of the
27 woman's physician, based upon the particular facts of the case, there is a reasonable likelihood
28 of sustained survival of the fetus outside the woman's uterus, with or without artificial aid.

29 Sec. 18.16.100. SHORT TITLE. This chapter may be cited as The Reproductive Privacy
30 Act.

31 * Sec. 3. AS 08.64.326(a) is amended to read:

- 1 (a) The board may impose a sanction if the board finds after a hearing that a licensee
2 (1) secured a license through deceit, fraud, or intentional misrepresentation;
3 (2) engaged in deceit, fraud, or intentional misrepresentation while providing
4 professional services or engaging in professional activities;
5 (3) advertised professional services in a false or misleading manner;
6 (4) has been convicted, including conviction based on a guilty plea or plea of nolo
7 contendere, of
8 (A) a felony or other crime if the felony or other crime is substantially
9 related to the qualifications, functions, or duties of the licensee; or
10 (B) a crime involving the unlawful procurement, sale, prescription, or
11 dispensing of drugs;
12 (5) has procured, sold, prescribed, or dispensed drugs in violation of a law,
13 regardless of whether there has been a criminal action;
14 (6) intentionally or negligently permitted the performance of patient care by
15 persons under the licensee's supervision that does not conform to minimum professional
16 standards even if the patient was not injured;
17 (7) failed to comply with this chapter, a regulation adopted under this chapter, or
18 an order of the board;
19 (8) has demonstrated
20 (A) professional incompetence, gross negligence, or repeated negligent
21 conduct; the board may not base a finding of professional incompetence solely on the
22 basis that a licensee's practice is unconventional or experimental in the absence of
23 demonstrable physical harm to a patient;
24 (B) addiction to, severe dependency on, or habitual overuse of alcohol or
25 other drugs that impairs the licensee's ability to practice safely;
26 (C) unfitness because of physical or mental disability;
27 (9) engaged in unprofessional conduct or in lewd or immoral conduct in
28 connection with the delivery of professional services to patients;
29 (10) has violated AS 18.16.060(b) or a regulation adopted under AS 18.16.040
30 [AS 18.16.010];
31 (11) has violated any code of ethics adopted by regulation by the board;

1 (12) has denied care or treatment to a patient or person seeking assistance from
2 the physician if the only reason for the denial is the failure or refusal of the patient to agree to
3 arbitrate as provided in AS 09.55.535(a); or

4 (13) has had a license or certificate to practice medicine in another state or
5 territory of the United States, or a province or territory of Canada suspended or revoked unless
6 the suspension or revocation was caused by the failure of the licensee to pay fees to that state,
7 territory, or province.

8 * Sec. 4. AS 09.65.100(a) is amended to read:

9 (a) Medical and dental services for minors are governed by the following provisions:

10 [EXCEPT AS PROHIBITED UNDER AS 18.16.010(a)(3),]

11 (1) a minor who is living apart from the minor's parents or legal guardian and
12 who is managing the minor's own financial affairs, regardless of the source or extent of income,
13 may give consent for medical and dental services for the minor;

14 (2) a minor may give consent for medical and dental services if the parent or legal
15 guardian of the minor cannot be contacted or, if contacted, is unwilling either to grant or
16 withhold consent; however, where the parent or legal guardian cannot be contacted or, if
17 contacted, is unwilling either to grant or to withhold consent, the provider of medical or dental
18 services shall counsel the minor keeping in mind not only the valid interests of the minor but also
19 the valid interests of the parent or guardian and the family unit as best the provider presumes
20 them;

21 (3) a minor who is the parent of a child may give consent to medical and dental
22 services for the minor or the child;

23 (4) notwithstanding (2) of this subsection, a minor may give consent for
24 diagnosis, prevention, termination, or treatment of pregnancy, and for diagnosis and treatment
25 of venereal disease; a person who provides services to a minor under this subsection or who
26 is employed or otherwise associated with a person who provides services to a minor under
27 this subsection may not notify the minor's parent or guardian about the provision of
28 services unless the minor gives written consent to the notification; the minor's physician-
29 patient relationship and the minor's records shall be accorded the confidentiality, privileged
30 status, and privacy protection afforded to other physician-patient relationships and records;

31 (5) the parent or guardian of the minor is relieved of all financial obligation to

1 the provider of the service under this section.

2 * **Sec. 5.** AS 47.07 is amended by adding a new section to read:

3 Sec. 47.07.067. PAYMENT FOR ABORTIONS. (a) The department shall pay for
4 abortion procedures under this chapter to the extent permitted under federal law.

5 (b) An abortion procedure not covered by federal law for a person otherwise eligible for
6 assistance under this chapter shall be covered under AS 47.25.120 - 47.25.300.

7 * **Sec. 6.** AS 47.25 is amended by adding a new section to read:

8 Sec. 47.25.197. PAYMENT FOR ABORTIONS. Notwithstanding AS 47.25.200 or any
9 other provision of law, the department shall provide medical assistance payments under
10 AS 47.25.120 - 47.25.300 for the cost of services reasonably necessary for a therapeutic or
11 elective abortion performed by a physician for a person who is eligible for assistance under
12 AS 47.07 or AS 47.25.120 - 47.25.300.

13 * **Sec. 7.** AS 08.64.105 and AS 18.16.010 are repealed.

14 * **Sec. 8.** This Act takes effect immediately under AS 01.10.070(c).

FISCAL NOTE

BILL NO. HB 268

STATE OF ALASKA
1991 LEGISLATIVE SESSION

Revision Date: 3/8/91 Department Affected: Health & Social Services
 Title: An Act Providing for a woman's right to BRU: Medical Assistance
choose abortion without governmental interference Component: Various
 Sponsor: Boyer, ET. AL.
 Requestor: _____ COMPONENT SERIAL NO. 0 2 3 0

Expenditures/Revenues: Thousands of Dollars

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES	0	0	0	0	0	0
TRAVEL	0	0	0	0	0	0
CONTRACTUAL	0	0	0	0	0	0
SUPPLIES	0	0	0	0	0	0
EQUIPMENT	0	0	0	0	0	0
LAND & STRUCTURES	0	0	0	0	0	0
GRANTS CLAIMS	0	0	0	0	0	0
MISCELLANEOUS	0	0	0	0	0	0
TOTAL OPERATING	0	0	0	0	0	0
CAPITAL	0	0	0	0	0	0
REVENUE	0	0	0	0	0	0

FUNDING: (Thousands of Dollars)

GENERAL FUND	0	0	0	0	0	0
FEDERAL FUNDS	0	0	0	0	0	0
OTHER	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact: None

ANALYSIS: As written HB 268 would have no fiscal effect upon the expenditures of the Medicaid of the Medicaid or General Relief-Medical programs.

Prepared By: *Kincaid, D. Busch* Phone: 465-3355

Division: Division of Medical Assistance Date: 4-22-91

Approved by Commissioner: *[Signature]*

Agency: Health and Social Services Date: 4/23/91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impact Agency(ies).

NOTICE:

The House Health Education and
Social Services Committee

will be meeting in **Room 519**

today only

Thursday, April 25

8:00 - 10:00 a.m.

CS FOR HOUSE BILL NO. 255 (HES)

IN THE LEGISLATURE OF THE STATE OF ALASKA

SEVENTEENTH LEGISLATURE - FIRST SESSION

BY THE HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES COMMITTEE

Offered:

Referred:

Sponsor(s): **REPRESENTATIVES ELLIS, C.Davis, Ulmer**

A BILL

FOR AN ACT ENTITLED

1 **"An Act relating to a peer counselor program."**

2 **BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:**

3 *** Section 1.** AS 47 is amended by adding a new chapter to read:

4 **CHAPTER 18. ADOLESCENT PROGRAMS AND SERVICES.**

5 **Sec. 47.18.010. PEER COUNSELOR PROGRAM.** (a) The department shall develop
6 and implement a continuing statewide program of technical support and assistance to encourage
7 school districts, municipalities, and nonprofit corporations incorporated under AS 10.20 that
8 initiate implementation, or that are considering implementation, of adolescent peer counseling
9 groups under adult supervision for

10 (1) prevention of adolescent behavioral patterns that jeopardize physical and
11 mental health and that hamper social, educational, and personal development; and

12 (2) spreading information about services that are available to adolescents to help
13 them with their health needs.

14 (b) The program of technical support required under (a) of this section must include

1 (1) suggested methods for maintaining a high level of adolescent, parental, and
2 community support for peer counseling groups;

3 (2) workshops, seminars, or other training opportunities for adolescent peer
4 counselors and their adult leaders; this training must include sessions to

5 (A) develop interpersonal communications skills;

6 (B) teach accurate health information, emphasizing sexual development;

7 (C) provide information about services that are available in the peer
8 counselors' areas and how those services can be obtained for pregnancy prevention,
9 prenatal care, and healthy life skills; and

10 (D) encourage adolescents to avoid major risk-taking behavior and to
11 reinforce responsible behavior and self control;

12 (3) assistance in selecting appropriate resource materials for the groups;

13 (4) recommended mechanisms for effectively monitoring and evaluating the
14 activities and accomplishments of the groups; and

15 (5) other similar services to assist and encourage school districts, municipalities,
16 and nonprofit corporations incorporated under AS 10.20 in establishing and administering
17 adolescent peer counseling groups.

18 (c) In developing the program of technical support and assistance required under (a) of
19 this section, the department shall review and consider the activities and accomplishments in other
20 states that have developed peer counseling networks. The department shall solicit contributions
21 of money and expertise from the private sector that may be available for this type of program.

7-LS0791(J)
Lauterbach
4/22/91

CS FOR HOUSE BILL NO. 268 ()

IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES KOPONEN, Boyer, Ellis, Finkelstein, Lincoln, C.Davis, Carney, Donley, Moyer, Navarre, Ulmer, Gruenberg, Brown, Bruckman

A BILL

FOR AN ACT ENTITLED

1 "An Act providing for a woman's right to choose abortion without governmental
2 interference; protecting the right to use birth control; relating to payment for abortions
3 under Medicaid and general relief medical assistance; and providing for an effective date."

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

5 * Section 1. INTENT. The intent of AS 47.07.067 and AS 47.25.197, enacted by secs. 5 and 6 of
6 this Act, is to provide for payment for abortion services under AS 47.07 (Medicaid program) and
7 AS 47.25.120 - 47.25.300 (general relief medical assistance) to the extent that they were provided under
8 7 AAC 43.140, 7 AAC 43.825, 7 AAC 43.835, 7 AAC 47.210(7), 7 AAC 47.200(4)(E), 7 AAC
9 47.290(3) and (5), and related regulations, as they were in effect on April 10, 1991.

10 * Sec. 2. AS 18.16 is amended by adding new sections to read:

11 Sec. 18.16.020. DECLARATION OF PUBLIC POLICY. The legislature finds and
12 declares that an individual decision to commence, prevent, continue, or terminate a pregnancy
13 is a matter of profound personal choice. It is the public policy of the state to prevent
14 governmental interference with the rights of all individuals to use birth control and the rights of

1 all women to choose childbirth or to obtain a safe and legal abortion, as described in this chapter.

2 Sec. 18.16.030. PROTECTION OF REPRODUCTIVE CHOICE. (a) Except as provided
3 in AS 18.16.040 and 18.16.050(b), the state, an instrumentality of the state, or a political
4 subdivision of the state may not interfere with a woman's personal choice to commence, prevent,
5 continue, or terminate a pregnancy.

6 (b) The state, an instrumentality of the state, or a political subdivision of the state may
7 not interfere with the use of medically appropriate methods of contraception or abortion or the
8 manner in which medically appropriate methods of contraception or abortion are provided.

9 Sec. 18.16.040. REGULATIONS. (a) The Department of Health and Social Services
10 and the State Medical Board may adopt regulations relating to abortions performed before the
11 point of fetal viability but only if the regulations

12 (1) are designed to protect the life or health of a woman undergoing an abortion;

13 (2) constitute the least restrictive means of furthering the state's interest in the
14 woman's life or health;

15 (3) are consistent with established medical practice; and

16 (4) do not delay, increase the cost of, or limit the availability of an abortion.

17 (b) The Department of Health and Social Services and the State Medical Board may
18 adopt regulations relating to abortions performed after the point of fetal viability, but only if the
19 regulations

20 (1) leave the determination of viability completely within the professional
21 judgment of the woman's physician and do not interfere with the exercise of that judgment;

22 (2) are designed to protect the health of the fetus without impairing or risking the
23 impairment of the life or health of the woman undergoing the abortion;

24 (3) constitute the least restrictive means of furthering the state's interest in the
25 health of the woman and the fetus;

26 (4) are consistent with established medical practice; and

27 (5) do not delay, prohibit, or limit the availability of abortion.

28 Sec. 18.16.050. APPLICABILITY OF OTHER LAWS. (a) This chapter constitutes the
29 only authority under which the state, an instrumentality of the state, or a political subdivision of
30 the state may regulate abortions. To the extent that other laws of this state authorize regulations
31 that may affect abortions, those laws shall be construed to be limited by this chapter.

1 (b) This chapter may not be construed to authorize the unlicensed practice of medicine.

2 Sec. 18.16.090. DEFINITIONS. In this chapter,

3 (1) "interfere with" includes restrict, infringe, prevent, impede, prohibit, limit,
4 penalize, burden, or engage in an activity, whether intentional or unintentional, that creates a
5 disparate treatment or adverse effect;

6 (2) "medically appropriate" means generally recognized as medically safe and
7 effective or recommended by a physician in the good faith exercise of the physician's best
8 professional judgment, as regulated by generally accepted standards, licensing requirements for
9 medical facilities, or laws governing the prescription of drugs or medical devices;

10 (3) "pregnancy" means the reproductive process beginning with the implantation
11 of a fertilized ovum in the uterus;

12 (4) "viability" means the point at which, in the professional judgment of the
13 woman's physician, based upon the particular facts of the case, there is a reasonable likelihood
14 of sustained survival of the fetus outside the woman's uterus, with or without artificial aid.

15 Sec. 18.16.100. SHORT TITLE. This chapter may be cited as The Reproductive Privacy
16 Act.

17 * Sec. 3. AS 08.64.326(a) is amended to read:

18 (a) The board may impose a sanction if the board finds after a hearing that a licensee

19 (1) secured a license through deceit, fraud, or intentional misrepresentation;

20 (2) engaged in deceit, fraud, or intentional misrepresentation while providing
21 professional services or engaging in professional activities;

22 (3) advertised professional services in a false or misleading manner;

23 (4) has been convicted, including conviction based on a guilty plea or plea of nolo
24 contendere, of

25 (A) a felony or other crime if the felony or other crime is substantially
26 related to the qualifications, functions, or duties of the licensee; or

27 (B) a crime involving the unlawful procurement, sale, prescription, or
28 dispensing of drugs;

29 (5) has procured, sold, prescribed, or dispensed drugs in violation of a law,
30 regardless of whether there has been a criminal action;

31 (6) intentionally or negligently permitted the performance of patient care by

1 persons under the licensee's supervision that does not conform to minimum professional
2 standards even if the patient was not injured;

3 (7) failed to comply with this chapter, a regulation adopted under this chapter, or
4 an order of the board;

5 (8) has demonstrated

6 (A) professional incompetence, gross negligence, or repeated negligent
7 conduct; the board may not base a finding of professional incompetence solely on the
8 basis that a licensee's practice is unconventional or experimental in the absence of
9 demonstrable physical harm to a patient;

10 (B) addiction to, severe dependency on, or habitual overuse of alcohol or
11 other drugs that impairs the licensee's ability to practice safely;

12 (C) unfitness because of physical or mental disability;

13 (9) engaged in unprofessional conduct or in lewd or immoral conduct in
14 connection with the delivery of professional services to patients;

15 (10) has violated a regulation adopted under AS 18.16.040 [AS 18.16.010];

16 (11) has violated any code of ethics adopted by regulation by the board;

17 (12) has denied care or treatment to a patient or person seeking assistance from
18 the physician if the only reason for the denial is the failure or refusal of the patient to agree to
19 arbitrate as provided in AS 09.55.535(a); or

20 (13) has had a license or certificate to practice medicine in another state or
21 territory of the United States, or a province or territory of Canada suspended or revoked unless
22 the suspension or revocation was caused by the failure of the licensee to pay fees to that state,
23 territory, or province.

24 * Sec. 4. AS 09.65.100(a) is amended to read:

25 (a) Medical and dental services for minors are governed by the following provisions:

26 [EXCEPT AS PROHIBITED UNDER AS 18.16.010(a)(3),]

27 (1) a minor who is living apart from the minor's parents or legal guardian and
28 who is managing the minor's own financial affairs, regardless of the source or extent of income,
29 may give consent for medical and dental services for the minor;

30 (2) a minor may give consent for medical and dental services if the parent or legal
31 guardian of the minor cannot be contacted or, if contacted, is unwilling either to grant or

1 withhold consent; however, where the parent or legal guardian cannot be contacted or, if
2 contacted, is unwilling either to grant or to withhold consent, the provider of medical or dental
3 services shall counsel the minor keeping in mind not only the valid interests of the minor but also
4 the valid interests of the parent or guardian and the family unit as best the provider presumes
5 them;

6 (3) a minor who is the parent of a child may give consent to medical and dental
7 services for the minor or the child;

8 (4) notwithstanding (2) of this subsection, a minor may give consent for
9 diagnosis, prevention, termination, or treatment of pregnancy, and for diagnosis and treatment
10 of venereal disease, regardless of whether the parent or legal guardian of the minor can be
11 contacted;

12 (5) the parent or guardian of the minor is relieved of all financial obligation to
13 the provider of the service under this section.

14 * Sec. 5. AS 47.07 is amended by adding a new section to read:

15 Sec. 47.07.067. PAYMENT FOR ABORTIONS. (a) The department shall pay for
16 abortion procedures under this chapter to the extent permitted under federal law.

17 (b) An abortion procedure not covered by federal law for a person otherwise eligible for
18 assistance under this chapter shall be covered under AS 47.25.197.

19 * Sec. 6. AS 47.25 is amended by adding a new section to read:

20 Sec. 47.25.197. PAYMENT FOR ABORTIONS. Notwithstanding AS 47.25.200 or any
21 other provision of law, the department shall provide medical assistance payments under
22 AS 47.25.120 - 47.25.300 for the cost of services reasonably necessary for a therapeutic or
23 elective abortion performed by a physician for a person who is eligible for assistance under
24 AS 47.07.067(b) or AS 47.25.120 - 47.25.300.

25 * Sec. 7. AS 08.64.105 and AS 18.16.010 are repealed.

26 * Sec. 8. This Act takes effect immediately under AS 01.10.070(c).

HB 268

Site Sponsor	TTL	Testified	Unable	Observed
Juneau ①	35 35	3 6	2 Rep 17 18	8 9
WA DC ②	1	1		
NY NY ③	1	1		
ANCH ④	27	2	17	8
Barrow ⑤	2	1	0	1
Bethel ⑥	2	2	0	0
Fairbanks ⑦	14	4	10	0
GAKONA ⑧	9	7	0	2
Glennallen ⑨	5	2	3	0
Homer ⑩	2	2	0	0
Kenny Lake ⑪	3	3	0	0
Ketchikan ⑫	26	2	15	9
Kodiak ⑬	8	2	5	1
Kotzebue ⑭	2	0	0	2
MAT-SU ⑮	5	2	3	0
Petersburg ⑯	5	2	0	3
Sitka ⑰	21	2	9	10
Slana ⑱	3	1	0	2
Soldotna ⑲	9	3	6	0
	181	48	88	47

of sites — 19
 # of Testified — 47 public
 1 Sponsor
 # Unable to Testify — $\frac{8 \text{ public}}{2 \text{ Rep}}$
 Observed: 47

Support: 15
 Oppd: 32

Total: ~~181~~ 178
 1 sponsor (TEST)
 2 rep (Unable)
 181

(Excludes 1 sponsor (TESTIFIED) + 2 Reps (Unable))
 Supported: 15 + sponsor
 Opposed Against: ~~32~~ 32
 Reps for Anchors

THE FOLLOWING DOCUMENT MAY NOT FILM
LEGIBLY BECAUSE OF THE POOR QUALITY OF THE
ORIGINAL

 *
 * DELIVER TO: LHSCHES
 *
 * ORIGINAL
 * SENT: 04/25/91 TIME: 11:17
 * FROM: LTCKTN
 * SUBJECT: 91-04-126, FD, HB268, 4-25
 * PRINT DATE: 04/25/91 TIME: 11:17
 *

Ketchikan

T/C NO: 91-04-126
 DATE: APRIL 25, 1991
 SPONSOR: (H) HEALTH, EDUCATION & SOCIAL SERVICES
 SUBJECT: HB268: REPRODUCTIVE PRIVACY ACT
 MODERATOR: RAE RHODES & JUNE ROBBINS
 SITE: KETCHIKAN

Ketchikan

FINAL STATS

 TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
TERESA A. CREVIER	1123 BLACK BEAR RD.	KETCHIKAN 99901 225-6588	HB268
KIRK THOMAS, L.D.S. CHURCH	1471 TONGASS AVE	KETCHIKAN 99901 225-3655	HB268
***** UNABLE TO TESTIFY			
1. GLINORE JACOBSEN	2125 SECOND AVE.	KETCHIKAN 99901 225-3395	HB268
2. EDWARD B. MECHAM	P. O. BOX 5975	KETCHIKAN 99901 225-9306	HB268
3. BETH T. WRIGHT	3201 BARANOF, 202	KETCHIKAN 99901 225-8034	HB268
4. MARTHA DEVEREAUX	2182 S. TONGASS	KETCHIKAN 99901 225-3414	HB268
5. A. FRED MILLER	637 MAIN ST.	KETCHIKAN 99901 225-6666	HB268
6. NAOMI G. FLAIG	92 FRANKLIN ROAD S.	KETCHIKAN 99901 225-5417	HB268
7. JEANNEANE HENRY	1038 DUNTON	KETCHIKAN 99901 225-2428	HB268
8. JOHN W. REDELF	P. O. BOX 7782	KETCHIKAN 99901 225-8897	HB268
9. CAROLYN DIXON	846 WARREN	KETCHIKAN 99901 225-2044	HB268
10. TERRI KOLEAN	6069A S. TONGASS	KETCHIKAN 99901 225-2031	HB268
11. MARTA POORE	P. O. BOX 9396	KETCHIKAN 99901 247-8103	HB268
12. LARRY J. DANIEL	P. O. BOX 7831	KETCHIKAN 99901 225-2210	HB268
13. MEREDITH MARSHALL	P. G. BOX 7418	KETCHIKAN 99901 225-3877	HB268
14. JANET JOHN	P. O. BOX 7962	KETCHIKAN 99901 225-3872	HB268
15. ARLENE M. DUBOSE	2415 TONGASS AVE.	KETCHIKAN 99901 225-6298	HB268

OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	FILL NO.
1. JANCIE D. JARED	1428 FAIRY CHASM	KETCHIKAN 99901	247-9824
2. LOREECE KRAUSS, L.D.S. CHURCH	P. O. BOX 3242	KETCHIKAN 99901	225-9289
3. LAURIANNE L. PAGE, L.D.S. CHURCH	P. O. BOX 7121	KETCHIKAN 99901	225-0645
4. WALTER KRAUSS, L.D.S. CHURCH	P. O. BOX 3242	KETCHIKAN 99901	225-9289
5. CLARENCE TENNEY, L.D.S. CHURCH	P. O. BOX 1004	WARD COVE 99928	225-4363
6. RAYMOND KOLEAN	6069A S. TONGASS	KETCHIKAN 99901	225-2631
7. GREGORY S. KOLEAN	886 BROWN DEER RD.	KETCHIKAN 99901	225-3011
8. SUSAN GASS	719 GRANT ST.	KETCHIKAN 99901	225-3482
9. JUDITH MILLER	637 MAIN ST.	KETCHIKAN 99901	225-5540

TESTIFIED: 2
UNABLE: 15
OBSERVED: 9
TOTAL: 26

START TIME: 8:00 AM END TIME: 10:05 AM

KETCHIKAN
RUE MADIER
8839B: BELFODIGANAE
(N) HEVEM' EPOCOWION P' LUCINI ZEKALCEZ

* DATE: 11/11/11
* TIME: 10:05 AM
* PAGE: 1
* OF: 1

Ancho

Anchorage

 * DELIVER TO LHSCHES
 * ORIGINAL
 * SENT: 04/25/91 TIME 14:00
 * FROM: [REDACTED]
 * SUBJECT: 91-04-126,FS,HR 268,4-25
 * PRINT DATE: 04/25/91 TIME 14:00

SUBJECT LINE TO READ: TO NO., PLAN, WHO, SUBJECT, DATE

T/C NO: 91-04-126
 DATE: 04/25/91
 SPONSOR: LHSCHES
 SUBJECT: HR 268, HR 247, HR 24
 MODERATOR: [REDACTED]
 SITE: ANCHORAGE

FINAL STATE

 TESTIFIED:
 NAMES REPRESENTING ADDRESS PHONE BILL NO.
 * THEDA [REDACTED]
 * BONNIE L. [REDACTED] 1065 W. [REDACTED]

***** UNABLE: *****

- | | | | |
|--------------------------|-------------------------|----------|-----|
| 1. FRANCIS T HURLEY | 600 W 11TH | 258-7898 | 268 |
| 2. DAVE WITT | 3605 ARCTIC BLVD #2281 | 561-2201 | 268 |
| 3. JASON RAMPTON | 9711 TAKLO CIR.,ER | 694-9503 | 247 |
| 4. ILEEN SELF | 8209 MADINE ST #2,99507 | 527-1240 | 268 |
| 5. LINDA KINGKADL | BOX 100804,99510 | 272-7184 | 268 |
| 6. REV. STEVE GRESKOWIAK | 2200ARCTIC,99503 | 277-6731 | 268 |
| 7. JAMIE BOLLEMBACH | BOX 201844,99520 | 276-2258 | 268 |
| 8. SUSAN ANSTINE | 18645 PUFFIN DR. | 341-2460 | 268 |
| 9. MICHAEL GRAF | 215 INA,FBX,99701 | 456-3367 | 268 |
| 10. WILLIAM MOFFATT | BOX 201586 | 344-2443 | 268 |
| 11. DONNA HURDLE | PLANNED PARENTHOOD | 563-2229 | 268 |
| 12. LEILA WISE | 1101 CORDOVA #229 | 277-1330 | 268 |
| 13. JOANNE MOSESIAN | 13700 SPEC KING RD. | 345-3195 | 268 |
| 14. ELEANOR SPERVAK | 1700 EASTRIDGE DR. | 277-9616 | 268 |
| 15. JOHN WHISMAN | 4700 E 113TH | 346-3238 | 268 |
| 16. JOANNE HECKSTROTH | 3020 MINNESOTA DR. | 276-4767 | 268 |
| 17. DOUG SCHMEDLER | 3321 E 41ST AVE,99508 | 563-3554 | 268 |

***** TO OBSERVE: *****

NAME REPRESENTING	ADDRESS	PHONE	BILL NO.
1. HYDRA MAYNARD	2237 FOREST PARK DR.,99517		
2. JOANNE HODEI	1226 S ST.	272-4305	268
3. ED PAWELEN	3301 LKSHR DR,99517	243-2449	268
4. JOEL WIEMAN	2526 TURNAGAIN FWAY	276-7374	268
5. SAM KITO	4126 A'OLLO		
6. JIM COLDULE(SP)	245 OCEANVIEW	545-6316	268
7. ROBERTA J. WASELL	6421 RIDGE TREE	346-2337	268
8. ANNE SPONHOLTZ			

 TESTIFIED: 2
 UNABLE: 17
 OBSERVED: 8
 TOTAL: 27

STARTING TIME: 8:00 ENDING TIME: 10:05

DELIVER TO: ENCLOSED

* ORIGINAL
 * SENT: 04/25/91 TIME: 10:15
 * FROM: LTCCBAR
 * SUBJECT: 91-04-126, FS, HB268, 4-25
 * PRINT DATE: 04/25/91 TIME: 10:16

Barrow

SUBJECT LINE TO READ: TC NO.; PL/FS; SHORT SUBJECT; DATE

T/C NO: 91-04-126
 DATE: 4-25-91
 SPONSOR: H, HESS
 SUBJECT: MULTIPLE BILLS
 MODERATOR: ROGER
 SITE: BARROW

REVISED FINAL STATS

 TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. DEBBIE HILDERBRAND, NSB			HB 268
2.			
3.			
4.			
5.			

 OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. CHARLES GOLDSMITH, AST, BOX 870			HB 268
2.			
3.			
4.			
5.			

 TESTIFIED: 1

UNABLE: 0
 OBSERVED: 1
 TOTAL: 2

START TIME: 8:00 A.M. END TIME: 10:00 A.M.

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*****
*
* DELIVER TO: LISCHES
*
*
* ORIGINAL
* SENT:          04/25/91  TIME: 09:58
* FROM:          LTCCBET
* SUBJECT:       91-04-126;FS;HB 268;4/25
* PRINT DATE:   04/25/91  TIME: 09:58
*
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Bethel

SUBJECT LINE TO READ: TC NO.; PL/FS; SHORT SUBJECT; DATE

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T/C NO:      91-04-126
DATE:        APRIL 25, 1991
SPONSOR:     (H) HESS
SUBJECT:     HB 268,247,248
MODERATOR:   JANET
SITE:        BETHEL
              FINAL STATS LIST

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TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
PAHNEM KINEGAKBOX 528,	BET	543-3685	HB 268
CATHY FEASTERBOX 1345,	BET	543-3276	HB 268

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TESTIFIED:    2
UNABLE:
OBSERVED:
TOTAL:        2

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START TIME: 8:00AM

END TIME:

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*****
*
* DELIVER TO: LMSCHE
*
* ORIGINAL
* SENT: 04/25/91 TIME: 11:35
* FROM: LTCCFBX
* SUBJECT: 91-04-126,FS;HB268;4-25
* PRINT DATE: 04/25/91 TIME: 11:35
*
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F0KS

SUBJECT LINE TO READ: TC NO.;PL/FS;SHORT SUBJECT;DATE

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T/C NO: 91-04-126
DATE: APRIL 25, 1991
SPONSOR: HOUSE HESS
SUBJECT: HB 268: HB 247: HB 248
MODERATOR: FRAN
SITE: FAIRBANKS

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FINAL STATS

TO TESTIFY

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. PATRICK SHIER,	112 MARYLEIGH,FBX,99701	452-4534	HB268
2. LIZ GRAY,	215 INA ST.,FBX,99701	456-3367	HB268
3. JEANNE BYRNES,	260 FAIR PLACE,FBX,99712	457-2179	HB268
4. JOHN COGHILL JR.,	854 KEELING RD.,FBX,99711	488-7786	HB268
5. DOUG DUFFETT,	1162 HAYES AVE.,FBX,99709	479-2197	HB268
6. PHILIP NICE,	1648 SKYFLIGHT,FBX,99709	455-6072	HB268
7. MARY ANN BORCHERT,	1758 CHENA RIDGE,FBX,99709	479-2087	HB268
8. GENEVIEVE CARBOY,	5253 OLD RIDGE TRAIL,FBX,99709	479-2333	
9. NATHALIE SANTORA,	286 ESTER DR.,FBX,99709	479-2147	HB268
10. D.A. MCGILVARY,	504 MONROE,FBX,99701	456-4875	HB268
11. SUSAN YANISH,	602 LATHROP,FBX,99701	456-2488	HB268
12. GRANT MATHEKE,	2064 GOLDSTREAM FBX,99709	455-6470	HB268
13. MYRT CHARNEY,	304 SALTER DR.,FBX,99701	451-6207	HB268
14. THOMAS BYRNES,	260 FAIRPLACE,FBX,99707	457-2179	HB268

OBSERVED

NAME/RERESENTING	ADDRESS	PHONE	BILL NO.
1.			
2.			
3.			
4.			
5.			

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*****
TESTIFIED: 4
UNABLE: 10
OBSERVED: 0
TOTAL: 14

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START TIME: 8:00 A.M. END TIME: 10:00 A.M.

GAKONA

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*****
*
* DELIVER TO: LMSCHE$
*
* ORIGINAL
* SENT: 04/25/91 TIME: 11:16
* FROM: LTCCGLN
* SUBJECT: 91-04-126,FS,PRIVACY ACT
* PRINT DATE: 04/25/91 TIME: 11:17
*
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SUBJECT LINE TO READ: TC NO.;FL/FS;SHORT SUBJECT;DATE

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T/C NO: 91-04-126
DATE: 04-25-91
SPONSOR: (H) HESS
SUBJECT: REPRO.PRIVACY ACT
MODERATOR: BOB CARNAHAN VTS
SITE: GAKONA

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FINAL STATS

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TESTIFIED

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	NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1.	BOB CARNAHAN	BOX 228 GAKONA 99586	822-3571	HB 268
2.	CARON BOEHLER	BOX 120 GAKONA 99586	822-3004	HB 268
3.	ALTHEA HUGES	BOX GAKONA 99586	822-3896	HB 268
4.	ALEN LEMASTERS	BOX 222 GAKONA 99586	822-3696	HB 268
5.	LINDA GERTH	BOX 245 GAKONA 99586	822-5898	HB 268
6.	CHUCH MCMAHAN	BOX 113 GAKONA 99586	822-3553	HB 268
7.	JIM GERTH	BOX 245 GAKONA 99586	822-5898	HB 268
8.				
9.				
10.				

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*****
OBSERVED

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	NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1.	MRS. BOB CARNAHAN	BOX 228 GAKONA 99586	822- 3571	HB 268
2.	DONA CALCOTE	BOX 665 COPPER CENTER 99588	822- 3897	HB 268
3.				
4.				

GLENNALLEN

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*****
*
* DELIVER TO: LHSCHES
*
*
* ORIGINAL
* SENT:          04/25/91  TIME: 10:51
* FROM:          LTCCGLN
* SUBJECT:       91-04-126,FS,PRIVACY ACT
* PRINT DATE:   04/25/91  TIME: 10:51
*
*****

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SUBJECT LINE TO READ: TC NO.; PL/FS; SHORT SUBJECT; DATE

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T/C NO:      91-04-126
DATE:        04-25-91
SPONSOR:     (H) HESS
SUBJECT:     REP.PRIVACY ACT
MODERATOR:   PATSY HILL
SITE:        GLENNALLEN

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FINAL STATS

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*****
TESTIFIED

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NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. ALFRED KRINKE	BOX 545 GLENNALLEN 99588	822-3390	HB 268
2. SANDY FLOYD	BOX 249 GLENNALLEN 99588	822-5856	HB 268
3. SCOTT YAHR	BOX 223 GLENNALLEN 99588	822-5212	HB 268
4. CATHERINE PERRETT	BOX 53 GLENNALLEN	822-3527	HB 268
5. PAMEL POLITO	BOX 171 GLENNALLEN 99588	822-3453	HB 268

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*****
OBSERVED

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NAME/RERESENTING	ADDRESS	PHONE	BILL NO.
1.			
2.			
3.			
4.			
5.			

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*****
TESTIFIED: 2

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UNABLE:      3
OBSERVED:    2
TOTAL:       5

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START TIME:   8:00
END TIME:     10:05AM

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Homer

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*****
*
* DELIVER TO: LHSCHES
*
* ORIGINAL
* SENT:          04/25/91  TIME: 10:10
* FROM:          LTCCHOM
* SUBJECT:       91-04-126;FS;H.HESS;4-25-91
* PRINT DATE:   04/25/91  TIME: 10:10
*
*****

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SUBJECT LINE TO READ: TC NO., PL/FS, SHORT SUBJECT, DATE

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T/C NO:      91-04-126
DATE:        APRIL 25, 1991
SPONSOR:     HOUSE HESS
SUBJECT:     HB 268
MODERATOR:   CHARLENE
SITE:        HOMER

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FINAL STATS

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*****
TESTIFYING

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	NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1.	KIM SMITH, KBFFC, BOX 2742, HOMER 99603		235-3436	HB268
2.	SUSAN KERNES, KBFFC, BOX 2742, HOMER		235-3436	HB268
3.				
4.				
5.				

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*****
OBSERVING

```

	NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1.				
2.				
3.				
4.				
5.				

```

*****
TESTIFIED:    2
UNABLE:       0

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OBSERVED:     0
TOTAL:        2

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START TIME: 9:25AM

END TIME: 10:10AM

* DELIVER TO: LHSCHE

* ORIGINAL

* SENT: 04/25/91 TIME: 10:57
* FROM: LTCCGLN
* SUBJECT: 91-04-126,FS,PRIVACY ACT
* PRINT DATE: 04/25/91 TIME: 12:32

Kenny Lake

SUBJECT LINE TO READ: TC NO., PL/FS; SHORT SUBJECT; DATE

T/C NO: 91-04-126
DATE: 04-25-91
SPONSOR: (H) HESS
SUBJECT: REP. PRIVACY ACT
MODERATOR: RUTH MCHENRY VTS
SITE: KENNY LAKE

FINAL STATS

TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. RUTH MCHENRY	HC60 BOX 306-COPPER CENTER	822-3644	HB 268
2. KATIE HELKENN	HC60 BOX 306 COPPER CENTER	822-3469	HB 268
3. SCOTT DAVIS	HC60 BOX 154 COPPER CENTER	822-3387	HB 268
4. 99573			
5.			

OBSERVED

NAME/RERESENTING	ADDRESS	PHONE	BILL NO.
1.			
2.			
3.			
4.			
5.			

TESTIFIED: 3

UNABLE:
OBSERVED:
TOTAL: 3

START TIME: 8:00

END TIME: 10:05AM

 *
 * DELIVER TO: LHSCHES
 *
 *
 * ORIGINAL
 * SENT: 04/25/91 TIME: 10:36
 * FROM: LIOCKOD
 * SUBJECT: 91-04-126,FS;HB 268,4-25-91
 * PRINT DATE: 04/25/91 TIME: 10:37
 *

KODIAK

T/C NO: 91-04-126
 DATE: 4/25/91 - THURSDAY
 SPONSOR: HOUSE HESS COMMITTEE
 SUBJECT: HB 268 - REPRODUCTIVE PRIVACY ACT
 MODERATOR: LORNA STEELMAN
 SITE: KODIAK LIO

FINAL STATS

TESTIFIED:

~~1~~ DOROTHY WEEKS, BOX 1428 - KODIAK 99615, 486-6171 BILL NO.
HB 268

~~2~~ CATHY LINDSEY, 3162 SPRUCE CAPE RD. - KODIAK 99615, 486-5625

WERE HERE TO TESTIFY BUT UNABLE BECAUSE TIME RAN OUT:

- 3. CATHY WILSON, BOX 2038 - KODIAK 99615, 487-2379
- 4. LINDA FREED, S.R. 3295 - KODIAK 99615, 486-5314
- 5. KERMIT REPPOND, 1616 SELIEF LANE - KODIAK 99615, 486-6593
- 6. DELINDA LACE, 298 SHAHAFKA - KODIAK 99615, 486-6248,
- 7. MICHAEL GREEN, S.R. 11020 - KODIAK 99615, 487-2468,

OBSERVED:

1. LETITIA RAUB, BOX 3663 - KODIAK 99615, 487-2782 HB 268

TESTIFIED: 2
 UNABLE: 5
 OBSERVED: 1
 TOTAL: 8

 * DELIVER TO: LHSCHES *
 * ORIGINAL *
 * SENT: 04/25/91 TIME: 11:24 *
 * FROM: LTCCMAT *
 * SUBJECT: 126FS H HES REPRO PRVCY 4/25/1 *
 * PRINT DATE: 04/25/91 TIME: 11:24 *

Petersburg

SUBJECT LINE TO READ: TC NO,; PL/FS;SHORT SUBJECT;DATE

T/C NO: 91-04-126
 DATE: 4/25/91
 SPONSOR: H HESS
 SUBJECT: REPRODUCTIVE PRIVACY - HB 268
 MODERATOR: MARY, DEBBIE
 SITE: MAT-SU LIO

MAT-SU

FINAL STATS

TESTIFIED:
 1 DICK STOEFFEL 1352 PIONEER PEAK DR WASILLA 99687 HB268

2 HEATHER LEHE HC01 BX 6306 PALMER 99645 HB268

UNABLE TO TESTIFY:

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1 MARTIE ROZKYDAL	POB 400	PALMER 99645	HB268
2 LOIS KNAPP	POB 940232	HOUSTON 99694	HB268
3 CAROLINE DEMIENTIEFF	HC 30 BX 5569-NE	WASILLA 99687	HB268

OBSERVED:
 1
 2

TESTIFIED: 2
 UNABLE: 3
 OBSERVING:
 TOTAL 5

START TIME: 8 AM END TIME: 10 AM

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* DELIVER TO: LHSCHES
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* ORIGINAL
* SENT: 04/25/91 TIME: 10:59
* FROM: LIOCPSG
* SUBJECT: 91-04-126;H.HESS;4/25
* PRINT DATE: 04/25/91 TIME: 10:59
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SUBJECT LINE TO READ: TC NO.;FL/FS;SHORT SUBJECT;DATE

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T/C NO: 91-04-126
DATE: 04/25/91
SPONSOR: HOUSE HESS
SUBJECT: HB 268
MODERATOR: DOROTHY PENTTILA
SITE: PETERSBURG

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PARTICIPANT LIST

FINAL STATS

TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. HARLENE CUSHING COALITION OF ALASKANS FOR CHOICE	BOX 1356 PETERSBURG	772-4779	HB 268
2. ROXANE L. LEE SELF AND BFW	BOX 747	772-3256	HB 268

OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. DENISE GUBERNICK COALITION OF ALASKANS FOR CHOICE	BOX 775 PETERSBURG	772-3087	HB268
2. SUSAN ERICKSON BFW	BOX 53	772-9237	HB268
3. KELVIN SCHUBERT	BOX 437	772-4408	

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TESTIFIED: -2-
UNABLE: -0-
OBSERVED: -3-
TOTAL: -5-

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* DELIVER TO: KMSCHES

* ORIGINAL

* SENT: 04/25/91 TIME: 10:49
* FROM: LIQCSIT
* SUBJECT: 91-04-126;FS;HHESS;4-25-91
* PRINT DATE: 04/25/91 TIME: 10:49

SITKA

SUBJECT LINE TO READ: TC NO.;PL/FS;SHORT SUBJECT;DATE

T/C NO: 91-04-126
DATE: APRIL 25, 1991
SPONSOR: HOUSE HESS
SUBJECT: HB 268
MODERATOR: THERESA WYMAN
SITE: SITKA

FINAL STATS LIST

WERE HERE TO TESTIFY

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. CHARLES HORAN, BOX 2003, SITKA 99835			HB 268
2. RYAN MILLER, BOX 992, SITKA 99835			" "
3. BRUCE CONINE, 614 MERRILL ST, SITKA 99835			" "
4. SUSAN JENSEN, BOX 464, SITKA 99835			" "
5. JULIA LADUKE, 111 FINN ALLEY, SITKA 99835			" "
6. MARY SOLTIS, 615 DEGROFF, SITKA 99835			" "
7. SUSAN KANES, 431 VERSTOVIA AVE, SITKA 99835			" "
8. RUTH MCKENZIE, BOX 1922, SITKA 99835			" "
9. KAREN CHRISTNER, 301 WORTMAN LOOP, SITKA 99835			" "
10. VERA ZABORSKE, 3488-A HPR, SITKA 99835			" "
11. SHERRI SCHAUWECKER, 1310 EDGECLUMBE DRIVE, SITKA 99835			HB 268

OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. DOUG JENSEN, BOX 464, SITKA 99835			HB 268
2. RUSSELL CAMERON, 435 VERSTOVIA, SITKA 99835			HB 268
3. SHIRLEY DEMMERT, 316 WORTMAN LOOP, SITKA 99835			HB 268
4. TERI LUNDY, BOX 2975, SITKA, AK 99835			HB 268
5. CLEO K. STOKES, BOX 2282, SITKA 99835			HB 268

6. BILL DONNELLY, BOX 2584, SITKA 99835			HB 268
7. PAULA DONNELLY, BOX 2584, SITKA 99835			HB 268
8. ALICE CAMERON, 435 VERSTOVIA, SITKA 99835			HB 268
9. JOHN MONNIN, 1801 ALDERWAY APT C, SITKA 99835			HB 268
10. DANIEL G. REAR, 1007 HFE, SITKA 99835			HB 268

TESTIFIED: 02
UNABLE: 07
OBSERVED: 12
TOTAL: 21

START TIME: 8:00 AM END TIME: 10:00 AM

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* SENT: 04/25/91 TIME: 11:05 *
* FROM: LTCCGLN *
* SUBJECT: 91-04-126,FS,PRIVACY ACT *
* PRINT DATE: 04/25/91 TIME: 11:05 *

SLANA

SUBJECT LINE TO READ: TC NO.;FL/FS;SHORT SUBJECT;DATE

T/C NO: 91-04-126
DATE: 04-25-91
SPONSOR: (H) HESS
SUBJECT: REP.PRIVACY ACT
MODERATOR: THELMA SCHRANK VTS
SITE: SLANA

FINAL STATS

TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. MARY LOU THOMAS	SLANA 99586	N/A	HB 268
2.			
3.			
4.			
5.			

OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. SANDY GARBER	SLANA 99586	N/A	HB 268
2. THELMA SCHRANK SR	BOX 380 GAKONA 99586	822-3426	HB 269
3.			
4.			
5.			

TESTIFIED: 1

UNABLE:
OBSERVED: 2
TOTAL: 3

START TIME: 8:00

END TIME: 10:05AM

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* DELIVER TO: LMSCHE$
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* SENT: 04/25/91 TIME: 10:31
* FROM: LTCCSOL
* SUBJECT: 91-04-126;FS;HB268;4-25
* PRINT DATE: 04/25/91 TIME: 10:31
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Soldotna

SUBJECT LINE TO READ: TC NO.;PL/FS;SHORT SUBJECT;DATE

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T/C NO: 91-04-126
DATE: 4-25-91
SPONSOR: HOUSE HESS
SUBJECT: HB268
MODERATOR: ALYSON
SITE: SOLDOTNA

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FINAL STATS LIST

TESTIFYING

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. MARIE PENROD/BOX 4016,SOL;99669		262-6795	HB268
2. RUSS PENROD/ "		"	"
3. PEGGY MULLEN/43955 STERLING HWY,99669		262-7715	"
4. NANCY ROLLINS/BOX 1492, 99669		262-2622	"
5. KAREN MCGAHAN/RT 1,BOX 767;99611		283-4219	"
6. DENNIS CARLSON/BOX 1113; 99611			"
7. VERONICA KESSLER/1010 MINKE,99611		283-5316	"
8. REBECCA PERRY/BOX 3623;99611		262-3995	"
9. ANN PENCE/WRCC/325 S. SPRUCE;99611		283-9479	"
10.			

OBSERVING

- 1.
- 2.
- 3.

- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

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TESTIFIED: 02
UNABLE: 07
OBSERVED: 00
TOTAL: 09

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START TIME: 8:05

ENDTIME: 10:05



Alaska State Legislature

House of Representatives

COMMITTEE ON HEALTH, EDUCATION
AND SOCIAL SERVICES

SUBJECT OF MEETING:
HB 268 REPRODUCTION PRIVACY ACT

DATE: April 25, 1991

PLACE: Capitol Room 106

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?	WHAT SUBJECT/ WHICH BILL?
✓ BISHOP MICHAEL KENNY	CATHOLIC CHURCH	419 SIXTH ST. JUNEAU	99801	6-1669	6-2227	(Y) N	268
✓ Robert W. Wood, Sr	Self	P.O. Box 20218 JUNEAU AK 99802	99802	463-3834	-	(Y) N	268
Howard M. Wood	"	"	"	"		Y (N)	
Terry Martin	Dist. 13				3783	(Y) N	268
↓ PAUL B. ARNOLDT	SELF	4396 Cloverdale Street JUNEAU, AK. 99801	99801	789-3935	789-3935	(Y) N	268
✓ SID HEIDERSDORF	SELF	Box 020658, JUNEAU	99802	789-9858	-	(Y) N	268
✓ Patty Hartmann	Self	Box 24, Haines, 99827	99827	766-2145	766-2666	(Y) N	268
Futh Ann Bowman	self	Box 240741 Douglas 99822	99824	364-2220		Y (N)	268
Richard Conner	self	1700 crest AVE JUNEAU 99801	99803	789-9803	789-9905	Y (N)	268
Karen Trimble	self	Box 240609, Aukie Bay 99801		790-2031		Y (N)	268
Ida Barnach	Self	8292 Garnet St.	99801	789-9623	465-4531	(Y) N	268



Alaska State Legislature

House of Representatives

COMMITTEE ON HEALTH, EDUCATION
AND SOCIAL SERVICES

SUBJECT OF MEETING:

HB 268 REPRODUCTION PRIVACY ACT

DATE: April 25, 1991

PLACE: Capitol Room 106

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?	WHAT SUBJECT/ WHICH BILL?
Teri Jacobsen	Self	9243 Gee St Juneau	99801	789-7463	789-7440	(Y) N	268
Michelle Graves	Self	9483 meander way Juneau	99801	589-8414	same	Y N	268
Barb Kullander	self	PO Box 32182 Juneau	99803	789-2326	789-2176	Y N	268
Terence Kelly	Self	3333 howell ave apt #207 Juneau Alaska 99801	99801	463-3389	reTired	(Y) N	268
ROGER SNYDER	SELF	2710 DAVID ST. JUNEAU	99801	586-6559	586-6350	(Y) N	268
Emma Deats	Self	Box 87 Juneau AK 99802	99802	463 3262		(Y) N	268
TEO Deats	Self	Same as above	99802		465-3400	(Y) N	268
BRANDY BAKER	SELF	102 Peoples wharf	99801	586-1733	—	Y N	268
Jim Brayton	self	11930 Glacier Hwy	99821	789-7945	—	(Y) N	268
SARA GRAY	Self	315 5th St. #10 Juneau	99801	463 3968	364-2514	(Y) N	268
PHILIP L. GRAY	SELF	4410 N DOUGLAS Juneau Hwy	99801	586-6113	SAME	(Y) N	268



Alaska State Legislature

House of Representatives

COMMITTEE ON HEALTH, EDUCATION
AND SOCIAL SERVICES

DATE: April 25, 1991

PLACE: Capitol Room 106

SUBJECT OF MEETING:

HB 268 REPRODUCTION PRIVACY ACT

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?	WHAT SUBJECT/ WHICH BILL?
Nilda Sullivan	self	P.O. Box 020874 Juneau 998	99802	789-2000	same	<input checked="" type="radio"/> Y <input type="radio"/> N	268
LAURIE SCANDLING	self	Box 21553	99802			<input checked="" type="radio"/> Y <input type="radio"/> N	268
GORDON LAMDES	Div. of MEDICAL ASSISTANCE	PO Box H-07 Juneau, AK 99811			465-3355	<input checked="" type="radio"/> Y <input type="radio"/> N	AVAILABLE FOR QUESTIONS RE FISCAL NOTE - 268
Susan Seti						<input type="radio"/> Y <input type="radio"/> N	
Ken Mattson	Alaskans for Life	Box 32186 Juneau AK 99803		789-5224		<input checked="" type="radio"/> Y <input type="radio"/> N	HB 268 / SB 249
Mike Grieser	self	9951 Slope Rich.		789-5582		<input checked="" type="radio"/> Y <input type="radio"/> N	HB 268
Diana Grieser	self	" " "		"		<input checked="" type="radio"/> Y <input type="radio"/> N	" "
Rep. Loren Leman		PO Box 11 Juneau, AK 99811		789-5582	405-2095	<input checked="" type="radio"/> Y <input type="radio"/> N	HB 268
Harold Almon	SELF	8148 PINEWOOD DR DUNSMUIR, AK		769-9853		<input checked="" type="radio"/> Y <input type="radio"/> N	HB 268
Pat Denny	self	526 Seward St, Juneau	99802	586-3925		<input checked="" type="radio"/> Y <input type="radio"/> N	
Kay Smith	self	526 Seward	99801	586-3354		<input type="radio"/> Y <input checked="" type="radio"/> N	



Alaska State Legislature

House of Representatives

COMMITTEE ON HEALTH, EDUCATION
AND SOCIAL SERVICES

SUBJECT OF MEETING:
HB 268 REPRODUCTION PRIVACY ACT

DATE: April 25, 1991

PLACE: Capitol Room 106

NAME	REPRESENTING	BUSINESS/PERSONAL MAILING ADDRESS	ZIP	(H) PHONE	(W) PHONE	DO YOU WANT TO TESTIFY?	WHAT SUBJECT/ WHICH BILL?
Sharon Pelton	Catholic Community Services	419-6 th St, CCSU Juneau 99801		463-5574	463-3933	Y (N)	268
SHERIE GOU	Alaska Women's Lobby	PO Box 22156 - Jno 99802			463-6744	(Y) N	HB 268
Lisa Weisler	SELF	157 B Castineau Ave		463-3804		(Y) N	HB 268
✓ Sandy King						Y N	268
						Y N	
						Y N	
						Y N	
						Y N	
						Y N	
						Y N	
						Y N	

We Affirm

NATIONAL
RELIGIOUS
ORGANIZATIONS'
STATEMENTS
ON
ABORTION
RIGHTS



RELIGIOUS COALITION FOR ABORTION RIGHTS

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INTRODUCTION

For communities of faith, reproductive rights issues are difficult ones. People with equally committed religious convictions differ greatly in their opinions on these sensitive issues.

Widespread denominational support exists for the right of women to choose safe and legal abortion, but the public has been falsely led to believe that all religions are opposed to abortion rights. The religious pro-choice community has a deep respect for the value of potential human life and an equally deep commitment to women as responsible, moral decision makers.

National denominations and faith groups compassionately support the right of women to choose abortion as one among a whole range of options, including childbirth and adoption. This support is documented by the official resolutions and statements contained in the pages of *We Affirm*.

The Religious Coalition for Abortion Rights is a national nonprofit, nonpartisan coalition of 35 Protestant, Jewish, and other denominations and faith groups. While religiously and theologically diverse, we are unified in our commitment to preserve reproductive freedom.

The Coalition believes that the right of reproductive freedom is intrinsically tied to religious liberty. We oppose any attempts to enact into secular law restrictions on abortion based on one particular theological definition of when the fetus becomes a person. Those who do not share that theology would be denied the right to make decisions regarding abortion according to the teachings of their faith.

Because of the range of religious beliefs on this sensitive issue, the abortion decision must remain free from government interference. The decision must remain with the woman, to be made in accordance with her conscience and personal religious principles and in conjunction with her family, her clergy and her doctors.

Many of the religious organizations contained in *We Affirm* are members of the Religious Coalition for Abortion Rights. Some of these denominations are represented in the Coalition by their agencies that address reproductive freedom issues. The member groups of the Religious Coalition for Abortion Rights are listed on page 31.

American Baptist Churches, USA

General Board, 1988

As American Baptists, members of a covenant community of believers in Jesus Christ, we acknowledge life as a sacred and gracious gift of God. We affirm that God is the Creator of all life, that human beings are created in the image of God, and that Christ is Lord of life. Recognizing this gift of life, we find ourselves struggling with the painful and difficult issue of abortion. Genuine diversity of opinion threatens the unity of our fellowship, but the nature of covenant demands mutual love and respect. Together we must seek the mind of Christ.

As American Baptists we oppose abortion

- *as a means of avoiding responsibility for conception,*
- *as a primary means of birth control, without regard for the far-reaching consequences of the act.*

We denounce irresponsible sexual behavior and acts of sexual violence that contribute to the large number of abortions each year.

We grieve with all who struggle with the difficult circumstances that lead them to consider abortion. Recognizing that each person is ultimately responsible to God, we encourage women and men in these circumstances to seek spiritual counsel as they prayerfully and conscientiously consider their decision.

We condemn violence and harassment directed against abortion clinics, their staff and clients, as well as sanctions and discrimination against medical professionals whose consciences prevent them from being involved in abortions.

We also recognize that we are divided as to the proper witness of the church to the state regarding abortion. Many of our membership seek legal safeguards to protect unborn life. Many others advocate for and support family planning legislation, including legalized abortion as in the best interest of women in particular and society in general. Again, we have many points of view between these two positions. Consequently, we acknowledge the freedom of each individual to advocate for a public policy on abortion that reflects his or her beliefs.

... We Call Upon American Baptist Congregations

- *to challenge members to live in a way that models responsible sexuality in accordance with biblical teaching,*

- to expend efforts and funds for teaching responsible sexuality,
- to provide opportunities for intergenerational dialogue on responsible sexuality and Christian life,
- to provide relevant ministries to adolescents and parents of adolescents in and outside the church.

American Ethical Union

Annual Assembly, 1973 (reaffirmed 1979)

The American Ethical Union wishes to express its disapproval of efforts to amend or circumvent the United States Constitution in such manner as would nullify or impede the decision of the United States Supreme Court regarding abortion.

We further believe that denial of Federal or State funds for abortion where they are provided for other medical services discriminates against poor women and abridges their freedom to act according to their conscience. The American Ethical Union supports the expansion of governmental family planning services as a means of reducing the need for abortion. (1979)

American Ethical Union, National Service Conference

1976 (reaffirmed 1979)

We believe in the right of each individual to exercise his or her conscience; every woman has a civil and human right to determine whether or not to continue her pregnancy. We support the decision of the United States Supreme Court of January 22, 1973 regarding abortion.

We believe that no religious belief should be legislated into the legal structure of our country; the state must be neutral in all matters relating to religious concepts. (1976)

American Friends Service Committee

1970 (reaffirmed 1989)

For two decades the AFSC has taken a consistent position supporting a

woman's right to follow her own conscience concerning child-bearing, abortion and sterilization. AFSC is deeply aware that the decision to terminate a pregnancy is seldom an easy one. That choice must be made free of coercion, including the coercion of poverty, racial discrimination and unavailability of services to those who cannot pay. (1989)

American Humanist Association

Annual Conference, 1977

We affirm the moral right of women to become pregnant by choice and to become mothers by choice. We affirm the moral right of women to freely choose a termination of unwanted pregnancies. We oppose actions by individuals, organizations and governmental bodies that attempt to restrict and limit the woman's moral right and obligation of responsible parenthood.

American Jewish Committee

1989

Abortion is an intensely complex and personal decision, one which raises profound moral and religious questions which the government cannot and should not attempt to answer for every individual. Furthermore, the decision to terminate a pregnancy must remain a private one because of the unique physical, emotional, and psychological effects on a pregnant woman and her family.

Jewish tradition, as well as this country's constitutionally mandated separation of church and state, affirms the validity of this approach. While Jewish tradition on this issue is complex, it allows for various options depending on individual cases and circumstances. The obvious lack of religious and civic consensus on this subject only underscores the importance of government not imposing one particular view of abortion on those of diverse religious and ethnic backgrounds. Such a position is consistent with not only Jewish tradition but also pro-family values and the rights and dignity of women.

In light of recent developments in the Supreme Court and elsewhere, AJC has adopted the following principles to guide us in the area of reproductive rights:

1) A pregnant woman has the right to make her own decision regarding whether to terminate or continue a pregnancy, free from any coercion or restrictions on her access to abortion.

2) AJC supports voluntary counseling programs that foster serious consideration of abortion decisions and family communication about these decisions, and supports programs and policies that limit the need for abortion including adequate family planning, sex education, and programs designed to prevent teen pregnancy.

3) AJC will oppose restrictions on access to abortion clinics or burdensome licensing regulations on clinics which provide abortion. AJC supports public funding for abortions, as for other medical procedures, and medical insurance that covers abortion in order to protect health and promote equity.

4) AJC will also oppose restrictions on United States funding for family planning assistance abroad that are imposed when any counseling or service related to abortion is provided. AJC will oppose any legal requirement for parental or spousal consent or notification, whether or not they include judicial bypass procedures.

5) AJC endorses private and government sector programs that support women who choose to continue their pregnancies including good prenatal care, adoption services, maternal and child health programs, quality child care and other efforts to ensure the health and welfare of women and families.

American Jewish Congress

Biennial Convention, 1989

The American Jewish Congress has long recognized that reproductive freedom is a fundamental right, grounded in the most basic notions of personal privacy, individual integrity and religious liberty. Jewish religious traditions hold that a woman must be left to her own conscience and God to decide for herself what is morally correct. The fundamental right to privacy applies to contraception to avoid unintended pregnancy as well as to freedom of choice on abortion to prevent an unwanted birth.

In a climate of intensified efforts by the present Administration and by certain members of Congress to inject the government into these most personal decisions, we restate our opposition to any vehicle that would threaten a woman's access to abortion. We also reiterate our support for

public funding of abortions so that the economically disadvantaged can exercise their right of choice along with the more affluent.

... The American Jewish Congress, therefore,

- *Affirms its support for a national commitment to federally subsidized national family planning services including abortion counseling and referrals;*
- *While encouraging parental involvement concerning family planning services for minors, opposes any efforts that would require parental notification or consent;*
- *Reaffirms its unwavering support for the Supreme Court decisions, including Roe v. Wade and Doe v. Bolton, which recognize that the Constitution guarantees women freedom of choice with respect to abortion;*
- *Reaffirms its opposition to all efforts—whether through Constitutional amendment, simple legislative fiat, or attacks on the jurisdiction of the courts—that would restrict or burden a woman's right to choose to terminate a pregnancy or that would compromise a physician's choice of treatment in the care of a pregnant woman for medical or surgical conditions which have no relationship to the pregnancy but which could adversely affect the fetus;*
- *Rejects all efforts to undermine the role of the judiciary and violate the principle of separation of powers with respect to reproductive freedom;*
- *Rejects efforts that would deny individual religious liberty to either clergy or lay people who, by virtue of their sincerely-held religious beliefs, may differ in interpreting when to attribute "personhood" to prenatal life; and*
- *Rejects efforts to impose restrictions on international family planning initiatives that include abortion.*

B'nai B'rith Women

Biennial Convention, 1976 (reaffirmed 1978)

Although we recognize there is a great diversity of opinion on the issue of abortion, we also underscore the fact that every woman should have the legal choice with respect to abortion consistent with sound medical practice and in accordance with her conscience.

We wholeheartedly support the concepts of individual freedom of conscience and choice in the matter of abortion. Any Constitutional amend-

ment prohibiting abortion would deny to the population at large their basic rights to follow their own teachings and attitudes on the subject which would threaten First Amendment rights. Additionally, legislation designed to ban federal funding for health facilities for abortions is discriminatory, since it would affect disadvantaged women, who have no access to expensive private institutions.

Central Conference of American Rabbis

Annual Convention, 1980

In 1967 the Conference stated: "We strongly urge the broad liberalization of abortion laws in various states, and call upon our members to work toward this end."

The conference reaffirms this position with the following comments:

- *Jewish legal literature permits therapeutic abortion.*
- *The decision concerning any abortion must be made by the woman and not by the state or any other external agency.*
- *We oppose all constitutional amendments and legislation which would abridge or circumscribe this right.*
- *We call upon our rabbis and upon the Union of American Hebrew Congregations to strengthen their support of the Religious Coalition for Abortion Rights on national, state and local levels.*

Annual Convention, 1984

WHEREAS the so-called Hyde Amendment restricts the use of Medicaid funds for abortion; and other amendments have had a similar effect in other federal programs, so that a woman dependent on government health care cannot obtain a medically necessary abortion even if she is the victim of rape or incest or if her health is seriously jeopardized by continuation of the pregnancy; and

WHEREAS these restrictions have created greater health risks for poor women who have conscientiously chosen abortion but must delay the procedure while seeking private funds to pay for it;

THEREFORE BE IT RESOLVED that:

- *The Central Conference of American Rabbis calls upon the Congress to defeat the Hyde Amendment this year, and*

- *The Central Conference of American Rabbis supports the Fazio-Green legislation which would eliminate such restrictions in the authorization for all federal governmental programs.*

Christian Church (Disciples of Christ)

General Assembly, 1975 (reaffirmed 1989)

WHEREAS, the Christian Church (Disciples of Christ) has proclaimed that in Christ, God affirms freedom and responsibility for individuals, and

WHEREAS, legislation is being introduced into the U.S. Congress which would embody in law one particular opinion concerning the morality of abortion . . .

THEREFORE BE IT RESOLVED, that the General Assembly of the Christian Church (Disciples of Christ) . . .

- *Affirm the principle of individual liberty, freedom of individual conscience, and sacredness of life for all persons.*
- *Respect differences in religious beliefs concerning abortion and oppose, in accord with the principle of religious liberty, and attempt to legislate a specific religious opinion or belief concerning abortion upon all Americans.*
- *Provide through ministry of the local congregation, pastoral concern, and nurture of persons faced with the responsibility and trauma surrounding undesired pregnancy.*

Council of Jewish Federations

General Assembly, 1989

The question of abortion is a sensitive one on which there are divergent opinions within the Jewish community. Rabbis of the major branches of Judaism in the United States may counsel members of their own congregations in accordance with their views of Jewish law. Such decisions must be made without intrusion by the government into what is essentially a right of individual and religious conscience, protected by the First Amendment to the United States Constitution.

Accordingly, we oppose any attempts by government to restrict the making of personal decisions in accordance with the individual's own religious

and moral views whether through administrative regulation, legislation or the courts.

CJF also supports efforts to foster better understanding by the Jewish and non-Jewish community of the traditional Jewish reverence for the sanctity of life while reiterating its support for the freedom of reproductive choice. CJF urges its member Federations to take individual and collective action to protect this basic right.

Episcopal Church

General Convention, 1988

All human life is sacred. Hence, it is sacred from inception until death. The Church takes seriously its obligation to help form the conscience of its members concerning this sacredness. Human life, therefore, should be initiated only advisedly and in full accord with this understanding of the power to conceive and give birth which is bestowed by God.

It is the responsibility of our congregations to assist their members in becoming informed concerning the spiritual, physiological and psychological aspects of sex and sexuality.

The Book of Common Prayer affirms that "the birth of a child is a joyous and solemn occasion in the life of a family. It is also an occasion for rejoicing in the Christian community" (p. 440). As Christians we also affirm responsible family planning.

We regard all abortion as having a tragic dimension, calling for the concern and compassion of all the Christian community.

While we acknowledge that in this country it is the legal right of every woman to have a medically safe abortion, as Christians we believe strongly that if this right is exercised, it should be used only in extreme situations. We emphatically oppose abortion as a means of birth control, family planning, sex selection or any reason of mere convenience.

In those cases where an abortion is being considered, members of this Church are urged to seek the dictates of their conscience in prayer, to seek the advice and counsel of members of the Christian community, and, where appropriate, the sacramental life of this Church.

Whenever members of this Church are consulted with regard to a problem pregnancy, they are to explore, with grave seriousness, with the person or

persons seeking advice and counsel, as alternatives to abortion, other positive courses of action, including, but not limited to, the following possibilities: the parents raising the child; another family member raising the child; making the child available for adoption.

It is the responsibility of members of this Church, especially the clergy, to become aware of local agencies and resources which will assist those faced with problem pregnancies.

We believe that legislation concerning abortions will not address the root of the problem. We therefore express our deep conviction that any proposed legislation on the part of national or state governments regarding abortions must take special care to see that individual conscience is respected and that the responsibility of individuals to reach informed decisions in this matter is acknowledged and honored.

Episcopal Women's Caucus

Annual Meeting, 1978

We are deeply disturbed over the increasingly bitter and divisive battle being waged in legislative bodies to force continuance of unwanted pregnancies and to limit an American woman's right to abortion.

We believe that all should be free to exercise their own consciences on this matter and that where widely differing views are held by substantial sections of the American religious community, the particular belief of one religious body should not be forced on those who believe otherwise.

To prohibit or severely limit the use of public funds to pay for abortions abridges and denies the right to an abortion and discriminates especially against low income, young and minority women.

Federation of Reconstructionist Congregations and Havurot

1981

Although the Jewish tradition regards children as a blessing, a gift of life itself, the tradition permits the abortion of an unborn child in order to safeguard the life and physical and mental health of the mother. The rabbis did not take a consistent stand on the question of whether a fetus re-

seems "a person." They did not think it possible to arrive at a final theoretical answer to the question of abortion, for that would mean nothing less than to be able to define convincingly what it means to be human.

We recognize that abortion is a tragic choice. Any prospective parent must make an agonizing decision between competing claims—the fetus, health, the need to support oneself and one's family, the need for time for a marriage to stabilize, responsibility for other children and the like. Some of us consider abortion to be immoral except under the most extraordinary circumstances. Yet we all empathize with the anguish of those who must make the decision to abort or not to abort.

Lutheran Women's Caucus

Convocation Gathering, 1990

WHEREAS Christ showed compassion and grace towards women and men in all circumstances of life; and

WHEREAS abortion has become the symbol for ambivalent feelings about female sexuality and female self-determination; and

WHEREAS women are responsible moral decision makers with respect to their own needs and the needs of others; and

WHEREAS a woman who has an abortion is often judged harshly as if the entire responsibility for the situation were hers; and

WHEREAS the incidence of abortion could be greatly reduced with social and cultural changes for which we all have responsibility, including complete and accurate sex education, adequate and available contraception, responsible non-coercive sexuality, health care, child care, parental leave, and other social support; and

THEREFORE BE IT RESOLVED that the Lutheran Women's Caucus affirm that a woman with an unintended pregnancy deserves the compassionate support of those closest to her, regardless of whether she terminates or continues her pregnancy; and

BE IT FURTHER RESOLVED that the Lutheran Women's Caucus become a part of the Religious Coalition for Abortion Rights (RCAR), a coalition of religious groups whose members hold diverse views about abortion and value the religious freedom that allows this diversity; and

BE IT FURTHER RESOLVED that the Lutheran Women's Caucus call

upon our various church bodies to work actively for the social and cultural changes that will reduce the incidence of abortion and stop scapegoating women who have abortions.

Moravian Church in America, Northern Province

1974

WHEREAS: the Moravian Church believes in the sacredness of life and in the quality of life, and

WHEREAS: we believe that abortion should not be used as a method of birth control nor as a means of controlling population, and

WHEREAS: Christian faith calls us to affirm the freedom of persons as well as the sanctity of life, therefore be it

RESOLVED: (9) that abortion should be a matter of responsible personal decision, with continuing counseling provided if desired, and be it further

RESOLVED: (10) that alternatives to abortion be given careful consideration in the perspective of possibly bringing mercy to a difficult situation. These alternatives include: (a) adoption, (b) single parenthood, (c) continued pregnancy for a married couple confronted with an unplanned pregnancy, (d) marriage for a single woman, or (e) temporary foster care, and be it further

RESOLVED: (11) that abortion be accepted as an option only where all other possible alternatives will lead to greater destruction of human life and spirit.

WHEREAS: neither science nor religion has claimed to fully understand the mystery of life or reached a decision as to when the life of an individual begins, and

WHEREAS: the Bible does not speak directly to the matter of abortion and the Moravian Church has refrained from being dogmatic when a biblical position was not clear, and

WHEREAS: there are circumstances under which the completion of an unwanted pregnancy may bring physical and/or emotional problems to the child and/or its parent(s), therefore be it

RESOLVED: (12) that members of the Moravian Church view abortion in the perspective of possibly bringing mercy to a difficult situation, and be it further

RESOLVED: (13) that this synod recommend that any person(s) considering abortion as a possible solution seek qualified medical and spiritual counsel, and be it further

RESOLVED: (14) that the individual(s) who chooses an alternative to abortion be offered adequate counseling during pregnancy and following delivery.

WHEREAS: it is the mission of the church to minister to persons in need, therefore be it

RESOLVED: (15) that the Moravian Church encourage its members to accept with empathy persons who are dealing with an unwanted pregnancy, and in accord with conviction assist in all possible tangible ways.

WHEREAS: "the Supreme Court decisions in January, 1973, clarified the legal context. The Court's action does not lessen, but increases, the responsibility of the churches to understand the circumstances in which the need for abortion arises; to make serious efforts to find solutions to the problems which have created this need; to struggle with the conflicting moral issues which this unique situation presents; and to become better equipped to counsel adequately those who are faced with a decision about abortion," therefore be it

RESOLVED: (16) that Moravian pastors keep abreast of current developments in this field, and be it further

RESOLVED: (17) that Moravian pastors be alert and responsive to opportunities for counseling with persons considering abortion, and be it further

RESOLVED: (18) that Moravian pastors support individual(s) in their decision by making referral to qualified agencies and/or physicians if needed, and be it further

RESOLVED: (19) that the Provincial Elders' Conference arrange for seminars on unwanted pregnancy counseling for pastors and other counselors.

WHEREAS: we recognize the freedom of the pastor not to counsel because of personal feelings or bias, and

WHEREAS: we should not fail to minister where ministry is needed and requested, therefore be it

RESOLVED: (20) that pastors who choose not to counsel refer the individual(s) to a qualified colleague or competent counseling service.

WHEREAS: education alone cannot be considered as a panacea for manag-

ing behaviors that may lead to problem pregnancy but may reduce the need for abortions, therefore be it

RESOLVED: (21) that the members of the Moravian Church support the Division of Educational Ministries implementation of programs of Family Life and Human Development and Human Sexuality that include information on birth control at appropriate levels of maturity.

NA'AMAT USA

Biennial Convention, 1983

Reproductive choice must be recognized as a matter of individual conscience outside the realm of government intrusion. We oppose attempts—whether by Constitutional amendment, legislation, judicial review or government regulation—to restrict women's access to safe and legal abortion, to bar financial assistance to women seeking abortion or to violate the confidentiality of family planning services.

We welcome decisions of the Supreme Court and other branches of the federal judiciary upholding women's rights: particularly opinions barring restrictions on women's right to abortion, and rulings against sex discrimination in employer-sponsored retirement plans and upholding the privacy of federally-funded family planning centers.

We must remain alert to defeat efforts in Congress to undermine the jurisdiction of federal courts on Constitutional matters relating to moral and social questions.

National Council of Jewish Women

National Convention, 1969 (reaffirmed 1979, 1982, 1987)

The members of NCJW reaffirm the strong commitment "to work to protect every woman's individual right to choose abortion and to eliminate any obstacles that would limit her reproductive freedom."

We believe that those who would legislate to deny freedom of choice compound the problems confronting women who are already condemned by poverty. It is therefore essential that federal and state funding be made available to women in need who choose abortion just as such funding is available for other medical procedures.

We decry the fact that poor and young women must bear the major brunt of anti-abortion rights measures, and call upon all public officials to support and protect the right of every American woman to choose or reject the act of childbearing. (1979)

National Federation of Temple Sisterhoods

Biennial Assembly, 1975 (reaffirmed 1977, 1981, 1989)

NFTS affirms our strong support for the right of a woman to obtain a legal abortion, under conditions now outlined in the 1973 decision of the United States Supreme Court. The Court's position established that during the first two trimesters, the private and personal decision of whether or not to continue to term an unwanted pregnancy should remain a matter of choice for the woman; she alone can exercise her ethical and religious judgement in this decision. Only by vigorously supporting this individual right to choose can we also ensure that every woman may act according to the religious and ethical tenets to which she adheres.

North American Federation of Temple Youth

1981

BE IT RESOLVED

- *That NFTY continue to strongly support the right of a woman to choose to obtain a safe, legal abortion, and*
- *That NFTY oppose any Constitutional amendment that could lead to the restriction of that right.*

Presbyterian Church (U.S.A.)

General Assembly, 1983 (reaffirmed 1985, 1987, 1988, 1989)

Any decision for an abortion should be made as early as possible, generally within the first trimester of pregnancy, for reasons of the woman's health and safety. Abortions later in pregnancy are an option particularly in the case of women of menopausal age who do not discover they are pregnant until the second trimester, women who discover through fetal diagnosis that they are carrying a fetus with a grave genetic disorder, or women who

did not seek or have access to medical care during the first trimester. At the point of fetal viability the responsibilities set before us in regard to the fetus begin to shift. Prior to viability, human responsibility is stewardship of life-in-development under the guidance of the Holy Spirit. Once the fetus is viable, its potential for physically autonomous human life means that the principle of inviolability can be applied.

... It is a tragic sign of the church's sinfulness that our propensity to judge rather than stand with persons making such decisions too often means that persons in need must bear the additional burden of isolation. It would be far better if the person concerned could experience the strength that comes from shared sensitivity and caring. The church is called to be the loving and supportive community within whose life persons can best make decisions in conformity with God's purposes revealed in Jesus Christ.

... The church's position on public policy concerning abortion should reflect respect for other religious traditions and advocacy for full exercise of religious liberty. The Presbyterian Church exists within a very pluralistic environment. Its own members hold a variety of views. It is exactly this pluralism of beliefs which leads us to the conviction that the decision regarding abortion must remain with the individual, to be made on the basis of conscience and personal religious principles, and free from governmental interference.

Consequently, we have a responsibility to work to maintain a public policy of elective abortion, regulated by the health code, not the criminal code. The legal right to have an abortion is a necessary prerequisite to the exercise of conscience in abortion decisions. Legally speaking, abortion should be a woman's right because, theologically speaking, making a decision about abortion is, above all, her responsibility.

As Presbyterians and U.S. citizens we have a responsibility to guarantee every woman the freedom of reproductive choice. We affirm the intent of existing law in the United States regarding abortion; protecting the pregnant woman. Medical intervention should be made available to all who desire and qualify for it, not just those who can afford preferential treatment.

... Thus the 195th General Assembly (1983):

• *Urges Presbyterian congregations and their individual members to:*

Provide a supportive community in which such decisions can be made in a setting of care and concern.

Respect the difficulty of making such decisions.

Affirm women's ability to make responsible decisions, whether the choice be to abort or to carry the pregnancy to term.

Protect the privacy of individuals involved in contraception and abortion decisions.

- *Affirms the church's commitment to minimize the incidence of abortion and encourages sexuality education and the use of contraception to avoid unintentional pregnancies, while recognizing that contraceptives are not absolutely effective . . .*
- *Recognizes that negative social attitudes toward women cast doubt on women's ability to make moral decisions and urges ministers and congregations to work to counter these underlying social attitudes and affirm the dignity of women.*
- *Recognizes that children may be born who are either unwanted or seriously handicapped and affirms the church's ongoing responsibility to provide supportive services to families in these situations and to help find appropriate institutional care and adoptive services where needed.*
- *Affirms the 1973 Roe v. Wade decision of the Supreme Court which decriminalized abortion during the first two trimesters of pregnancy . . .*
- *Urges the Presbyterian Church . . . to model the just and compassionate community by:*

Opposing adoption of all measures which would serve to restrict full and equal access to contraception and abortion services to all women, regardless of race, age, and economic standing.

Working actively to restore public funding by federal, state, and local governments for the availability of a full range of reproductive health services for the medically indigent . . .

Providing continuing support for women who, having made an abortion decision, may have doubts as to the wisdom of their choice, or having delivered a child are not able to cope with the separation of adoption or the responsibilities of child care.

. . . The 197th General Assembly (1985):

- *Reaffirms the position taken by the 195th General Assembly (1983);*
- *We affirm that abortion should not be used as a method of birth control;*
- *We affirm our support for the Religious Coalition for Abortion Rights as*

the most effective means for making our concern about keeping the availability of abortion services safe and legal;

- *We are in agreement (with) the protest against violence at abortion clinics and harassment of persons staffing clinics and persons seeking abortions.*

... The 199th General Assembly (1987):

- *Reaffirm(s) its freedom of choice position in relation to reproductive rights.*

... The 200th General Assembly (1988):

- *Directs the Moderator to select a task force to conduct a study, to be completed within two years of the National Conference on Abortion Perspectives, designed to give forum to each different theological position in debate of the issues related to problem pregnancies and abortion, and that the members of the commission represent the broadest spectrum of theological positions within the church . . .*

... The 201st General Assembly (1989):

- *Opposes abortion elected for the sole purpose of gender selection.*
- *Supports Operation Respect [of RCAR] which includes: "Clergy for Choice" campaign which encourages concerned clergy to sign a pledge of support for freedom of choice; deplors harassment of women seeking abortions or counseling; encourages presbyteries and sessions to study tactics used by groups such as "Operation Rescue."*
- *Encourages synods, presbyteries, local churches and individuals to reach out to those in crisis pregnancy situations giving resources, time and love.*

Reorganized Church of Jesus Christ of Latter Day Saints

1974 (reaffirmed 1980)

We affirm that parenthood is partnership with God in the creative processes of the universe.

We affirm the necessity of parents to make responsible decisions regarding the conception and nurture of their children.

We affirm a profound regard for the personhood of the woman in her

emotional, mental, and physical health; we also affirm a profound regard and concern for the potential of the unborn fetus.

We affirm the inadequacy of simplistic answers that regard all abortions as murder, or, on the other hand, regard abortion only as a medical procedure without moral significance.

We affirm the right of the woman to make her own decision regarding the continuation or termination of problem pregnancies. Preferably, this decision should be made in cooperation with her companion and in consultation with a physician, qualified minister, or professional counselor . . .

We affirm the need for skilled counselors being accessible to the membership of the church to assist persons in their struggle with issues centering in human sexuality, responsible parenthood, and wholeness of family life.

Union of American Hebrew Congregations

Biennial Convention, 1975 (reaffirmed 1981, 1990)

The UAHC has long been committed to the right of a woman to choose an abortion. We reaffirm the position of the 56th General Assembly in 1981, and we endorse the following resolution, adopted by the National Federation of Temple Sisterhoods in New Orleans in 1989:

“1. Affirm our unwavering commitment to the protection and preservation of the reproductive rights of women; pledge our presence and support wherever, whenever, and for however long our goal may require it at the federal, state and local levels of government; further, we affirm our commitment to work in coalition with compatible pro-choice groups, especially the Religious Coalition for Abortion Rights, for the attainment of our common goal.

2. Endorse the 1973 United States Supreme Court decision on *Roe vs. Wade* and deplore all attempts, legislative and judicial, to dismantle it.

3. Support non-restrictive federal and state funding of reproductive services, including abortion, and non-restrictive private insurer coverage.

4. Support minors' access to reproductive health services, including contraceptives and abortion, unrestricted by parental notification, parental permission, or court order requirements.

5. Support the use of public hospitals and clinics, however defined, for the performance of abortions, with unrestricted access and funding for women

who need it; affirm the right of health professionals, those publicly employed and those in private practice, to provide reproductive service counseling and advice, including information about family planning, contraception and abortion, and to perform abortions; oppose the criminalization of either the health professionals who perform or assist at abortions or the women who receive them and affirm the obligation of local governments to protect physically the clients, staff, and premises of reproductive care facilities against the actions of anti-choice persons and groups.

Further,

1. We applaud those decisions of the Supreme Court of Canada that have assured Canadian women their reproductive freedom;
2. We urge the NFTS world-wide constituents to work toward securing or retaining reproductive rights for all women."
3. In conjunction with the above, we urge our UAHC congregations to work toward securing or retaining reproductive rights for all women. (1990)

Unitarian Universalist Association

General Assembly, 1963

(reaffirmed 1968, 1973, 1975, 1977, 1978, 1980, 1987)

RIGHT TO CHOOSE

BECAUSE Unitarian Universalists believe that the inherent worth and dignity of every person, the right of individual conscience, and respect for human life are inalienable rights due every person; and that the personal right to choose in regard to contraception and abortion is an important aspect of these rights; and

BECAUSE we believe in tolerance and compassion for persons whose choices may differ from our own; and

BECAUSE we believe not only in the value of life itself but also in the quality of life; and

WHEREAS pain, suffering, and loss of life were widespread prior to the legalization of abortion in 1973 by the U.S. Supreme Court (*Roe v. Wade*) and the 1969 amendments to the Criminal Code of Canada; and

WHEREAS the issue of abortion is morally complex, abortion must remain a legal option; and

WHEREAS attempts are now being made to restrict access to birth control and abortion by overriding individual decisions of conscience, and attacks in legislatures, courts, and the streets often result in depriving poor women of their right to medical care; and such legislation is an infringement of the principle of separation of church and state in that it tries to enact private morality into public law; and

WHEREAS there is movement to re-criminalize abortion both for women and their health-care providers which could bring back dangerous alternatives to clinically safe abortions;

THEREFORE BE IT RESOLVED that the 1987 General Assembly of the Unitarian Universalist Association reaffirms its historic position, supporting the right to choose contraception and abortion as legitimate aspects of the right to privacy; and

BE IT FURTHER RESOLVED that:

1. Individual Unitarian Universalists educate themselves, their congregation, and the public about the new moral understandings emergent in the works of feminist theologians and social ethicists; and
2. Unitarian Universalists oppose any move to deny or restrict the distribution of government funds as a means of restricting access to full contraceptive and abortion counseling and/or services, at home or abroad; and
3. Unitarian Universalists actively oppose all legislation, regulations and administrative action, at any level of government intended to undermine or circumvent the *Roe v. Wade* decision; and
4. Unitarian Universalists communicate their opposition to such attempts to their legislative representatives and to the electorate; and
5. Unitarian Universalists expose and oppose bogus clinics and other tactics that infringe on the free exercise of the right to choose; and
6. Unitarian Universalists promote legislation funding safe abortions for low-income women; and
7. Individual Unitarian Universalists, congregations, and the Unitarian Universalist Association open discussion with those of different mind, and seek opportunities to work productively from shared values to promote family planning and education for responsible sex; and

BE IT FINALLY RESOLVED that we affirm the right to choose contraception and abortion as a legitimate expression of our constitutional rights. (1987)

Unitarian Universalist Women's Federation

Biennial Convention, 1975 (reaffirmed 1979, 1981)

The Unitarian Universalist Women's Federation reaffirm(s) the right of any woman of any age or marital or economic status to have an abortion at her own request upon consultation with her physician and urges all Unitarian Universalists in the United States and all Unitarian Universalist societies in the United States to resist through their elected representatives the efforts now under way by some members of the Congress of the United States to curtail their right by means of a Constitutional amendment or other means.

United Church of Christ

General Synod 16, 1987

(Additional statements regarding freedom of choice were passed in 1971, 1973, 1977, 1979, 1981, and 1989.)

SEXUALITY AND ABORTION: A FAITHFUL RESPONSE

WHEREAS, Scripture teaches us that all human life is precious in God's sight and teaches the importance of personal moral freedom; and

WHEREAS, previous General Synods, beginning in 1971, have considered the theological and ethical implications of abortion, and have supported its legal availability, while recognizing its moral ambiguity and urging that alternatives to abortion always be fully and carefully considered; and

WHEREAS, women and men must make decisions about unplanned or unwanted pregnancies that involve their physical, emotional, and spiritual well-being; and

WHEREAS, the United States leads nearly all other developed nations of the world in pregnancy, abortion, and childbearing rates for teen-agers; and

WHEREAS, access to birth control is being jeopardized by decreases in funding for human services, including family planning programs, and certain groups continue their efforts to reverse the *Roe v. Wade* decision of 1973, which affirms the right to choose a safe and legal abortion; and

WHEREAS, abortion is a social justice issue, both for parents dealing with pregnancy and parenting under highly stressed circumstances, as well as for our society as a whole; and

WHEREAS, previous General Synods have called upon the church to provide programs of counseling and education about the meaning and nature of human life, sexuality, responsible parenthood, population control, and family life;

THEREFORE, BE IT RESOLVED, that the Sixteenth General Synod:

1. affirms the sacredness of all life, and the need to protect and defend human life in particular;
2. encourages persons facing unplanned pregnancies to consider giving birth and parenting the child, or releasing the child for adoption, before abortion;
3. upholds the right of men and women to have access to adequately funded family planning services, and to safe, legal abortions as one option among others;
4. affirms the need for adequately funded support systems, including health and day care services, for those who choose to raise children;
5. urges that resources on human sexuality being prepared by the Board for Homeland Ministries be used widely in the churches, and that the resolutions of previous General Synods on sexuality issues be distributed and studied as part of these resources;
6. urges the United Church of Christ, at all levels, to provide support, resources, and information to persons facing unplanned pregnancies, including counseling of persons who choose to have abortions;
7. urges the United Church of Christ, at all levels, to provide educational resources and programs to persons, especially young persons, to help reduce the incidence of unplanned and unwanted pregnancies, and to encourage responsible approaches to sexual behavior;
8. urges pastors, members, local churches, conferences, and instrumentalities to oppose actively legislation and amendments which seek to revoke or limit access to safe and legal abortions.

United Methodist Church

General Conference, 1988

The beginning of life and the ending of life are the God-given boundaries of human existence. While individuals have always had some degree of

control over when they would die, they now have the awesome power to determine when, and even whether, new individuals will be born. Our belief in the sanctity of unborn human life makes us reluctant to approve abortion. But we are equally bound to respect the sacredness of life and well-being of the mother for whom devastating damage may result from an unacceptable pregnancy. In continuity with past Christian teaching, we recognize tragic conflicts of life with life that may justify abortion, and in such cases support the legal option of abortion under proper medical procedures. We cannot affirm abortion as an acceptable means of birth control, and we unconditionally reject it as a means of gender selection. We call all Christians to a searching and prayerful inquiry into the sorts of conditions that may warrant abortion. Governmental laws and regulations do not provide all the guidance required by the informed Christian conscience. Therefore a decision concerning abortion should be made only after thoughtful and prayerful consideration by the parties involved, with medical, pastoral, and other appropriate counsel.—*Social Principles*, 1988

When, through contraceptive or human failure, an unacceptable pregnancy occurs, we believe that a profound regard for unborn human life must be weighed alongside an equally profound regard for fully developed personhood, particularly when the physical, mental, and emotional health of the pregnant woman and her family show reason to be seriously threatened by the new life just forming. We reject the simplistic answers to the problem of abortion which, on the one hand, regard all abortions as murders, or, on the other hand, regard all abortions as procedures without moral significance.

When an unacceptable pregnancy occurs, a family, and most of all the pregnant woman, is confronted with the need to make a difficult decision. We believe that continuance of a pregnancy which endangers the life or health of the mother, or poses other serious problems concerning the life, health, or mental capability of the child to be, is not a moral necessity. In such a case, we believe the path of mature Christian judgement may indicate the advisability of abortion. We support the legal right to abortion as established by the 1973 Supreme Court decisions. We encourage women in counsel with husbands, doctors, and pastors to make their own responsible decisions concerning the personal or moral questions surrounding the issue of abortion.—*Resolution on Responsible Parenthood*, 1988

United Synagogue of America

Biennial Convention, 1975 (reaffirmed 1989)

Jewish tradition cherishes the sanctity of life, even the potential of life which a pregnant woman carries within her. Under certain unfortunate circumstances, such as when the life or health of the mother are in jeopardy, Judaism sanctions, even mandates, abortion. Judaism does not, however, condone or permit abortion for contraceptive purposes; and

Judaism does not believe that personhood and human rights begin with conception. The premise that personhood begins with conception is founded on a religious position which is not identical with Jewish tradition. Therefore, under special circumstances, Judaism chooses and requires abortion as an act which affirms and protects the life, well being and health of the mother. To deny a Jewish woman and her family the ability to obtain a safe, legal abortion when so mandated by Jewish tradition, is to deprive Jews of their fundamental right of religious freedom;

NOW, THEREFORE, BE IT RESOLVED that the United Synagogue of America continues to affirm its strong support for the 1973 Supreme Court decision of *Roe v. Wade*. Any weakening, limitation, or withdrawal of the *Roe v. Wade* decision is sure to produce tragic consequences. In light of the recent Supreme Court decision, we must be diligent in our efforts to safeguard and preserve the full personal and religious freedom given to the American people.

NOW, THEREFORE, BE IT FURTHER RESOLVED that the United Synagogue of America opposes any legislative attempt through constitutional amendments, the deprivation of medicaid, family services and/or other current welfare services, to weaken the force of the United States Supreme Court's decision permitting abortions. (1989)

Women's American ORT

1989

Women's American ORT reaffirms its long-held position that when and whether to bear a child is a woman's private decision, and should not be subject to intervention through legislation, Constitutional amendment or judicial decree. The sole determinants for a woman making such a decision should be her own personal convictions, needs and capacities. We deplore any measures which erode these fundamental rights of choice and

privacy. An added concern is that such measures frequently victimize society's most vulnerable women—the poor and disadvantaged. We regard such requirements as parental consent or notification, and unnecessarily burdensome licensing criteria for clinics, to be thinly disguised methods of restricting women's access to abortion. Further, we deem unconscionable the militant tactics of some anti-choice protestors, including harassment and intimidation of reproductive health care patients. Undeniably, they have the right to express their views, but they do not have the right to blockade clinic entrances or destroy clinic property. Women's American ORT will stand firm in its opposition to any attempts to narrow the opportunity for women to control their own lives.

Women's League for Conservative Judaism

Biennial Convention, 1974 (reaffirmed 1982)

Reverence for life is the cornerstone of our Jewish heritage. Since abortion in Jewish law is primarily for the mother's physical or mental welfare, we deplore the burgeoning casual use of abortion. Abortion should be "legally available, but ethically restricted. Though the abortion of a fetus is not equivalent to taking an *actual* life, it does represent the destruction of *potential* life and must not be undertaken lightly"

However, Women's League also believes that the practice of the principle of the separation of Church and State guaranteed by our Constitution has kept our nation strong and preserved full freedom for the individual. Women's League believes that transmitting religious values is the responsibility of the religious sector.

Women's League for Conservative Judaism urges its Sisterhoods to oppose any legislative attempts through Constitutional amendments, the deprivation of Medicaid, family services and/or other current welfare services, to weaken the force of the Supreme Court's decision permitting abortions. (1982)

*from *Love and Sex: A Modern Jewish Perspective* by Dr. Robert Gordis

Young Women's Christian Association of the U.S.A.

National Convention, 1970, 1973, 1988

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As an organization rooted in the Christian faith, the YWCA is deeply conscious of the difficult personal and ethical choices raised by the issue of abortion. The YWCA's position on this issue has been developed during almost two decades of study and action by the official representatives of our Associations across the country assembled in Convention. Eight successive Conventions, 1967, 1970, 1973, 1976, 1979, 1982, 1985, and 1988 have addressed this issue.

The position of the YWCA is not "pro-abortion." It is a position supporting a woman's right to make an individual decision based upon her own religious and ethical beliefs and her physician's guidance. This is the position taken by the Supreme Court on January 22, 1973, in the case of *Roe v. Wade*. The Court recognized that science cannot tell us "when life begins," for to science, all life is continuum. The answer to the question, "When does personhood begin?" must remain in the ethical and religious realm.

Since there is a wide variation of opinion among religious groups and individuals in our pluralistic society as to when personhood begins and what an ethical decision on abortion may be in different circumstances, the YWCA holds that no *one* religious belief should be mandated by law. Our government is expressly commanded to make no law establishing any one religion or prohibiting free expression of religion. Our position is supported by many of our members who would not themselves seek an abortion, but who are concerned to safeguard for all citizens the freedom of religion and conscience guaranteed by our Constitution.

Legal restrictions and prohibition of abortions affect primarily poor women, depriving them of safe, medically-approved abortions, while women of means can travel to locations where abortion is legal and safe. The problem of unwanted pregnancies cannot be solved by outlawing abortions, and the denial of public funding for abortions prevents some women from exercising a Constitutional right guaranteed to all.

For these reasons the YWCA supports "the repeal of all laws restricting or prohibiting abortions performed by a duly licensed physician and supports public funding for abortions and pre- and post-abortion counseling."

Members of the Religious Coalition for Abortion Rights

American Ethical Union	Committee of Women of Color Presbyterian Church (U.S.A.)
National Service Conference American Ethical Union	Social Justice and Peacemaking Ministry Unit Presbyterian Church (U.S.A.)
American Humanist Association	Women's Ministry Unit Presbyterian Church (U.S.A.)
American Jewish Committee	Union of American Hebrew Congregations
American Jewish Congress	Unitarian Universalist Association
B'nai B'rith Women	Unitarian Universalist Women's Federation
Division of Homeland Ministries Christian Church (Disciples of Christ)	Board for Homeland Ministries United Church of Christ
Womaen's Caucus Church of the Brethren	Coordinating Center for Women United Church of Christ
Episcopal Urban Caucus	Office for Church in Society United Church of Chris'
Episcopal Women's Caucus	General Board of Church and Society United Methodist Church
Women in Mission and Ministry The Episcopal Church	Women's Division General Board of Global Ministries United Methodist Church
Women for Social Witness (Episcopal)	United Synagogue of America
Federation of Reconstructionist Congregations and Havurot	Women's American ORT
Lutheran Women's Caucus	Women's League for Conservative Judaism
Committee on Church and Society Moravian Church in America Northern Province	Women's Rabbinic Network
NA'AMAT USA	YWCA National Board
National Council of Jewish Women	
National Federation of Temple Sisterhoods	
North American Federation of Temple Youth	

The logo of the Religious Coalition for Abortion Rights combines the symbols of two great religions. The Christian cross is made up of many branches rather than two strokes to represent the many sects of Christianity. Its lower branch is part of the menorah, symbol of the Old Testament, representing both the Jewish faith and the roots of Christianity. Resting on the base of three vertical bars (ancient symbol of an active intellect), the cross and menorah are intertwined to demonstrate the unity of purpose of the Coalition.



*For additional information about the
Religious Coalition for Abortion Rights, write or call:*

RELIGIOUS COALITION FOR ABORTION RIGHTS
100 Maryland Avenue, N.E.
Washington, D.C. 20002
202/543-7032



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(202) 543-7032



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WORDS OF CHOICE

Religious Coalition for Abortion Rights

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Religious Coalition for Abortion Rights
Washington, D.C.

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Chiquita G. Smith
President

Patricia A. Tyson
Executive Director

Ellen J. Appelbaum
Editor

Foreword

The richness of the English language allows tremendous breadth of description. Our choice of words and our willingness to be open to new ideas and information are important in any controversy, especially one related to the sensitive decisions women make about birth control and abortion. No one wants to be misled by words that convey a false image or impression.

All organizations utilize persuasive language, but some are not content with using words to convey their true or precise meanings. It is essential, therefore, that words and texts in the abortion debate be examined carefully for their meanings, as well as for the images they convey so that a real and lasting understanding of the issues in the debate may be promoted.

The Religious Coalition for Abortion Rights is well suited to prepare this guide to terminology and imagery because the Coalition operates within the religious and moral tradition of freedom as well as respect for persons. The Coalition asserts that women, as well as men, have the capability and the right to make moral choices regarding their lives, their health, their family security, and their future.

John M. Swomley, Ph.D.
Emeritus Professor of Christian Ethics
St. Paul School of Theology
Kansas City, Missouri

The Power of Language

When advocating for a cause, especially a controversial one, nothing is as powerful as the language we use. Whoever defines the debate has the battle half won. Words are chosen deliberately and carefully to persuade, but persuasive speech becomes propaganda when half-truths and inaccuracies are deliberately used to mislead.

The foundation of the carefully chosen language used by opponents of abortion rights is a theological assertion that human life or personhood begins at conception—a belief not shared by all faith groups. Although theologians have addressed the question of the beginning of life for centuries without reaching a single answer, abortion rights opponents promote their theological belief as the one and only truth.

To them, “baby” is interpreted as a synonym for the fetus and women who choose abortion are characterized as callous and irresponsible “baby killers.” Terms such as “abortion as birth control,” “abortion for convenience,” and “abortion on demand” imply that women who have abortions do so lightly and without thought.

Further, opponents of abortion rights select pictures and images that trivialize and devalue women. Pictures of late-term fetuses and abortions are used to stir our emotions and to evoke images of babies, but the images ignore the pregnant woman. Focusing on late-term fetuses diverts our attention from the pregnant woman and the small number of abortions performed after the first twelve weeks of pregnancy. Only nine percent of abortions are performed after the first trimester of pregnancy and only 0.01 percent after 24 weeks of pregnancy, the approximate time of viability—the point when a fetus has the capacity to survive outside the womb.¹

Words such as “baby killer” and “death chambers” clearly reflect an anti-choice point of view. Yet more subtle, equally dangerous terms find their way into journalism and public discourse. Individuals often use the misleading language, unaware of the terms’ half-truths and inaccuracies. How does this happen? The National Right to Life Committee and other anti-choice groups work with anti-choice legislators to write legislation using their carefully chosen, misleading language. The media then report on this legislation, using the words essentially as they appear in the bills. The media assumes that legislative language is neutral. Thus, the deceptive words are passed on to the public, which accepts them as neutral and begins to use them, often unaware of these words’ subtle manipulations.

Newspapers carry such misleading headlines as “Mother’s Right Upheld Over Fetus’s” and “Bill Would Ban Use of Abortion as Birth Control.” A woman is labeled a “mother” whether she has—or wants—children. Calling a pregnant woman “mother” also lacks respect for those pregnant women who, according to the teachings of their faith or their conscience, do not consider themselves mothers until they give birth, the moment when they believe that human life or personhood begins. Calling abortion a “method of birth control” legitimizes the implication that women in general are irresponsible and that those who decide upon abortion do so for trivial reasons.

These deceptive phrases are also reported on radio and television. We hear on the evening news that “the Supreme Court handed down a decision today on a matter of life and death.” By equating abortion with “a matter of life and death,” the position that human life begins at conception is reinforced.

All who discuss abortion rights must be held accountable for their words. To mislead and manipulate the public is dishonest. There is no room for dishonesty in the sensitive discussion of abortion.

Words of Choice is intended to review the dishonest language of abortion rights opponents and to reveal the false impressions these words convey. Readers are encouraged to use *Words of Choice* as a resource for factual information concerning reproductive freedom and as a basis to inform and educate those who use misleading language, whether they do so purposefully or not.

Glossary of Terms Used by Opponents of Abortion Rights

ABORTION AS BIRTH CONTROL

Opponents of abortion rights claim that over 90 percent of all abortions are used as a substitute for contraception.² Abortions excluded from this definition are only some of those performed because a woman's life is in danger, there is severe fetal deformity, or the pregnancy was a result of rape or incest.

Referring to abortion as a primary method of contraception implies that women in general are irresponsible and immoral. Further, it implies that those who choose abortion do so arrogantly, without carefully considering the impact of their decisions upon themselves and their families.

Contraceptive methods currently available in the United States do not meet the health, economic, and social needs of many women. In 1987, 51 percent of women who obtained abortions in 1987 were using a contraceptive method the month they became pregnant.³

According to a 1990 National Academy of Sciences report, wider choices of contraceptive methods and greater access to these methods exists in Western Europe and some less developed countries than in the United States. Problems of unintended pregnancy, unwanted children, excessive rates of abortion, and sterilizations are the result of the United States falling far behind many other countries in the development and availability of safe, effective contraceptive methods.⁴

Many organizations opposing abortion state they have no policy on contraception. Yet pressure from anti-abortion groups serves as an obstacle in the contraceptive development process.⁵

ABORTION FOR CONVENIENCE

Anti-abortion activists define abortion as a matter of convenience, depicting women who choose abortion as impulsive and careless.

What is dismissed as a "convenience" is in truth a judicious, wise choice for many women. The fact that many women endure shouting, harassing anti-abortionists at clinics is evidence not of convenience but what they consider a necessity.

Many pregnant women face great difficulty obtaining an abortion due to lack of access. More than 80 percent of U.S. counties, where 31 percent of women of reproductive age live, have no identified abortion providers. (See Waiting Period.)

ABORTION FOR GENDER SELECTION

Legislation barring abortion for the purpose of gender selection is often advocated by opponents of abortion rights.

Such legislation serves to promote the image that women are immorally choosing abortion. Neither statistics nor records exist to document the occurrence of gender selection abortions in the United States. The idea of gender selection abortions is a myth.

ABORTION ON DEMAND

Opponents of abortion rights assert that "abortion on demand" up until the moment of birth is available in the United States. This claim implies that a pregnant woman can walk into an abortion provider's office at any time in her pregnancy and demand an abortion. This is not true.

The Supreme Court's 1973 *Roe v. Wade* decision legalizing abortion did not authorize "abortion on demand" up until birth. The Supreme Court ruled that during the first 12–14 weeks—the first trimester—of pregnancy, the decision about an abortion is a private, medical one to be made by the woman in consultation with her doctor. During the second trimester, the Court ruled, the State may impose such restrictions as are necessary to safeguard the woman's health, but may not ban the procedure.

During the third trimester, as the point of viability approaches—the point when a fetus has the capacity to survive outside the womb—the Court ruled that the state's interest in protecting "potential life" becomes compelling and that the State may prohibit all abortions except those necessary to preserve the life or health of a woman. Opponents assert that the point of viability has moved to as early as 19 weeks of fetal development, but scientific evidence indicates that viability has not changed significantly since the 1973 decision.⁷

Few women obtain abortions late in their pregnancies. More than half of all abortions occur at or before the eighth week; 91 percent are performed in the first trimester; and just over 96 percent take place during the first 15 weeks of pregnancy. Only one half of one percent are performed past 20 weeks of gestation with most of these at 21 or 22 weeks. A mere 0.01 percent of all abortions, only about 100–200 procedures, are performed each year after 24 weeks of pregnancy.⁸

ABORTION PILL

Opponents of abortion rights label RU-486 the "death drug" and a "human pesticide" and are committed to fight any attempts to test the drug or bring it into the United States. They claim that RU-486 is medically harmful to women and argue that if it were available here, it would be casually obtainable over the counter.

RU-486 is a synthetic hormone that terminates a pregnancy in the early stages of the first trimester when taken with the hormone prostaglandin. By replacing surgical abortion, RU-486 promises to make the termination of an unplanned pregnancy private, non-invasive, and free of the harassing environment at many reproductive health care clinics, but RU-486 is not currently available in the United States.

"The American Medical Association and the American Psychological Association have endorsed testing and possible use of the pill." Studies conducted in France and Great Britain attest to the safety and effectiveness of RU-486 when taken in conjunction with prostaglandin.¹⁰ Studies also reveal that RU-486 shows promise as a treatment for endometriosis, breast cancer, Cushings disease, certain brain cancers, and viral infections.¹¹

Currently in France where RU-486 was developed, the pill is distributed under careful controls. Each pill is registered and dispensed only by designated clinics. The United States' strict drug safety standards could require similarly strict control.

ADOPTION

To opponents of abortion rights there are only two options for pregnant women: adoption or keeping the child.

Adoption is a well-chosen, wise option for some women faced with unplanned or problem pregnancies. However, adoption cannot stand in the place of abortion for all women. The physical risks and emotional and social burdens of carrying a pregnancy to term and then giving up the baby for adoption eliminate such a choice for many women.

Although abortion, pregnancy, and childbirth are relatively safe, pregnancy and childbirth are seven to 25 times more likely to result in the death of a pregnant woman than is an abortion.¹² More than half of all women who go through pregnancy and childbirth are treated for some medical complication and 30 percent are treated for major complications.¹³ In contrast, the rate of major complications from abortion, with no preexisting complications or concurrent sterilizations, was 0.5 percent from 1975 to 1978.¹⁴

In addition, statistics show that not all children are adoptable. While 100 adoptive couples or singles are waiting for every healthy white baby, they are less willing to adopt minority and disabled children.¹⁵ African American children comprise 25 percent of the children adopted or placed in adoptive homes but represent 38 percent of the children free for adoption and awaiting placement.¹⁶

AMERICAN HOLOCAUST

Abortion and the Nazi Holocaust are frequently equated by opponents of abortion rights. They refer to reproductive health care clinics as "death chambers" and title the professionals who perform abortions "Nazi butchers."

The comparison is unconscionable; it trivializes the immensity of the Hitler government's deliberate and systematic attempt to annihilate the entire Jewish population and other groups deemed "undesirable."

Governmental murder of entire populations cannot be equated with the thoughtful, individual decision of whether or not to carry a pregnancy to term. (See Genocide.)

BABY, OR UNBORN CHILD

Abortion rights opponents consistently refer to a fetus as a "baby," "unborn child," or "preborn." The use of humanizing terms such as "this little guy" is also encouraged.¹⁷

These words manipulate the public to perceive a fetus, from the moment of conception, as a cute and cuddly baby. Potential human life is equated with an actual human being.

BEGINNING OF LIFE

Abortion rights opponents claim the moral high ground by defining the moment of conception as the beginning of human life or personhood.

For centuries, theologians and scientists have argued the question of the beginning of life without reaching consensus. The position of the National Academy of Sciences is that "defining the time at which the developing embryo becomes a person must remain a matter of moral or religious value."¹⁸

Placing into law only one theory concerning the beginning of human life or personhood imposes a single theological perspective on all individuals, regardless of the teachings of their own faiths and violates the constitutional guarantee of freedom of religion. However, at least three states have declarations of legislative intent which clearly state that life begins at conception, thereby implying a fetus is a legal person. The states are Illinois, Louisiana, and Missouri.¹⁹

CLINIC RESCUES

To "rescue the babies," demonstrators from anti-abortion groups such as "Operation Rescue" physically block the doors of reproductive health care facilities to prevent abortions from taking place.

While these demonstrators harass women seeking abortions and medical personnel performing the procedure, they also prevent clinic

access to individuals seeking contraceptives and basic reproductive health care. In 1985, 47 percent of abortion providers, serving 83 percent of all abortion patients, were harassed.²⁰

These so called "rescuers" try to equate their activities with the non-violent protests of the Civil Rights Movement but many are arrested for assault, trespassing and invasion. The comparison is invalid. The aim of the Civil Rights Movement was to provide equal opportunities to persons denied opportunities because of race, ethnicity and/or sex but "rescuers" try to rescind and restrict rights.

When brought to trial, "rescuers" attempt to use the "necessity" or "choice of evils" defense, excusing their violence as necessary to prevent the "murder of unborn children." While most judges are not influenced by such, they have acquitted trespassers using this defense in at least two states.²¹

Demonstrators continue to blockade clinic doors despite Federal injunctions preventing them from doing so. Randall Terry, founder of Operation Rescue, has stated, "We have our own injunction. God's injunction."²²

FETAL TISSUE RESEARCH

Opponents of abortion rights are opposed to research using fetal tissue despite its possible success in treating Parkinson's disease, spinal cord injuries, epilepsy, diabetes, and Alzheimer's disease.²³ They contend that this research will encourage women to have abortions in order to profit from the procedure. They argue that these women will choose to become "baby machines," supplying the necessary fetal tissue as a way of increasing their income to provide for their families.

Abortion is a sometimes painful but necessary choice that women must make. Women will not become pregnant in order to profit from the sale of aborted fetal tissue, and responsible clinics will not engage in such practice.

In addition, women facing unplanned pregnancies are not interested in reading research which shows that fetal tissue can be used in the treatment of certain diseases. That is simply not a factor in a woman's decision to terminate a problem pregnancy.

GENOCIDE

Opponents of abortion rights claim that abortion is genocide of people of color. They contend that people of color are coerced into obtaining abortions at inner-city reproductive health care clinics by medical personnel, many of whom are white.

Webster's Dictionary defines genocide as "the deliberate and systematic destruction of a national, political, or cultural group."²⁴ This argument of abortion rights opponents is intended to make a pregnant woman of color believe that if she chooses abortion, she is guilty of participating in the annihilation of her race. Women of color and their families are denied the right to make wise, judicious, and responsible decisions. (See American Holocaust.)

HUMAN BEING

From the moment of conception, human cells are referred to as a human being by anti-abortion rights activists.

Such terminology is known as prolepsis, defined as "an anticipating, especially the describing of an event as if it had already happened," when in fact it may be months away or it may never happen.²⁵ Just as stepping on and crushing an acorn is not the destruction of an oak tree, human cells from the moment of conception are not human beings. (See Person.)

INNOCENT HUMAN LIFE

Opponents of abortion rights describe all fetuses as "innocent human life," thus implying that women who choose abortion defile innocence and are guilty, sinful murderers as well.

The term "innocent human life" was originally used by various popes to refer to fetal life that has committed no sin. The word "innocent" comes from two Latin words, *in* (not) and *nocere* (to harm) and therefore means not harmful or not dangerous. Some fetuses, though, are harmful to the life or health of the pregnant woman.

MEDICAL NECESSITY

Some abortion rights opponents will accept abortion when the life of a pregnant woman is at risk but not when danger to her health makes the procedure medically necessary.

A number of health conditions are exacerbated by pregnancy such as epilepsy, diabetes, malignant tumors, hypertension, kidney disease, sickle cell anemia, and heart disease. Pregnancy in these cases increases the severity of the disease and can lead to permanent damage.²⁶

MOTHER

Abortion rights opponents refer to all pregnant women, even the 11-year-old pregnant girl, as "mother" without knowing whether the women have or want children. They define motherhood by the nine months of pregnancy and the genetic tie between the woman and the fetus.

Labeling pregnant women "mother" creates images of babies, again defining the decision to terminate a pregnancy as negative. The Dictionary defines "mother" as "a woman who has borne a child; . . . (one who) nurtures in the manner of a mother."²⁷ Motherhood and parenting, when chosen, can be experiences filled with joy. But the label of "mother" promoted by opponents of abortion rights disregards the responsibilities of nurturing, loving, feeding and clothing children.

MURDER

Based on their position that a fetus is a human being, opponents of abortion rights describe abortion as "murder" and label women who choose to terminate their pregnancies "murderers."

If this assumption were more than misleading rhetoric and were carried to its logical conclusion, then women who choose abortion would be charged with murder and would face the death penalty or life imprisonment. Under these circumstances, the partner who participates in the decision, the clergy who counsels, or the health professional who performs the abortion would be charged as accessories to the "murder."

In addition, using false language such as "murder" creates the impression that abortion—a legal medical practice—is not only immoral but also illegal.

PARENTAL RIGHTS

Anti-abortion rights advocates, asserting the right of all parents to be involved in their children's decisions regarding abortion, have been proposing laws which dictate parental involvement and parent-child communication.

Many teenagers voluntarily seek out the love, support, and guidance of their parents when faced with such a difficult decision. More than 50 percent of abortion patients 17-years-old and younger involved at least one parent in their decision.²⁸

Legally mandating parent-child communication endangers those teenagers who feel they cannot talk with their parents for legitimate reasons, including a fear of abuse, loss of parental love, or because their pregnancy is a result of incest. Consequently, these teenagers are more likely to seek abortions in unsafe environments. Judicial bypass procedures, although often established to serve pregnant teenagers, are discriminatory, burdensome, and often ineffective.

Those proposing parental notification and consent legislation note that even ear piercing requires parental involvement. This trivializes the seriousness of an unwanted pregnancy. How many teenagers have died from a back-alley ear piercing?

PERSON

The anti-abortion rights movement defines a fertilized egg from the moment of conception as a person because it contains 46 chromosomes, the full genetic blueprint for a human body.

Just as a blueprint for a house is not a house, a genetic blueprint for a human body is not a person. A person is the cumulative result of a process, not merely a collection of genes. Scientists have estimated that only one-third to one-half of all fertilized eggs develop beyond conception even in the most favorable medical circumstances.²⁹

The U.S. Constitution defines a person as one who is "born." The Supreme Court ruled in *Roe v. Wade* that in the Constitution "the use of the word (person) is such that it has application only postnatally. None indicates, with any assurance, that it has any possible pre-natal application."³⁰ The Bible defines a person as "nefesh," one who breathes.³¹

POST ABORTION SYNDROME (PAS)

Opponents of abortion rights define Post Abortion Syndrome (PAS) as a form of post-traumatic stress disorder with long-term chronic symptoms which include nightmares, feelings of guilt, and attempted suicide.³² They claim that PAS is widespread not only among women who have had abortions but also among the men and parents involved in the decision.

While opponents claim post-traumatic stress disorder exists following abortion, abortion does not meet the American Psychiatric Association's definition of trauma.³³ Women may feel normal psychological reactions similar to postpartum depression for a few weeks because of hormonal changes following abortion.

The American Psychological Association convened an expert panel to examine 19 studies on the psychological impact of abortion. In April 1990, the panel unanimously concluded: "Although there may be sensations of regret, sadness or guilt, the weight of the evidence from scientific studies indicates that legal abortion of an unwanted pregnancy in the first trimester does not pose a psychological hazard for most women. . . . After first trimester abortion, most women most frequently report feeling relief and happiness. . . . Severe negative reactions after abortion are rare and can best be understood in the framework of coping with a normal life stress."³⁴

The American Psychiatric Association also recently studied the psychological impact of abortion on women. A panel of six leading psychiatrists concluded in May 1990 that based on their research, "government restrictions on abortion are more likely to cause women lasting harm than the procedure itself."³⁵

PRO-ABORTION

The anti-abortion rights movement refers to supporters of a woman's right to choose abortion as "pro-abortion."

This label is misrepresentative and dishonest. The term "pro-abortion" obscures the support of the reproductive rights movement for a woman's right to choose as one among a whole range of options, including parenthood and adoption. It also ignores the movement's emphasis on family planning—the prevention of unwanted pregnancy—and its affirmation of women as responsible, judicious, and moral decision makers.

To be pro-choice is not to be "pro-abortion." One can consider many abortions immoral but believe that abortion must remain a legal choice and oppose any government interference in that choice.

PRO-LIFE

The opponents of abortion rights, in promoting themselves as "pro-life," imply that those in support of a woman's right to choose abortion are "anti-life."

Activists in support of a woman's right to choose abortion also define themselves as "pro-life." "Life" encompasses both the physical life of the woman and the quality of life of her family and child should she choose to carry the pregnancy to term.

RAPE AND INCEST

Some who oppose abortion rights are willing to make exceptions in cases of rape or incest.

Exceptions for victims of rape or incest are necessary. Unfortunately, these exceptions are often only appearances of compassion because of strict requirements which mandate reporting within hours of the crime to law enforcement or public health agencies. Without fulfilling these often unrealistic requirements, victims may be deprived of access to abortion services.

Opponents of abortion rights walk a fine line within their own movement when they condone any abortion. Based on their own definition, they are guilty of being accessories to "murder" in certain circumstances by accepting rape and incest exceptions.

Rape and incest exceptions are only a first step in keeping the abortion right safe. However, abortion rights opponents promote these exceptions as a moderate solution to the abortion controversy. Making abortion acceptable only when the pregnancy is a result of abuse or a woman's powerlessness is neither moderate nor a solution.

SACREDNESS OR SANCTITY OF LIFE

Opponents of abortion rights try to claim the moral high ground by asserting the "sacredness or sanctity of human life" to defend their position. By implication then, supporters of abortion rights become immoral, irreligious and unconcerned about human life.

This concern for the "sacredness of human life" is, however, somewhat limited: it ignores the life of the pregnant woman and her existing family. The terms "sacredness of life" or "sanctity of life" do not appear in the Bible. Instead, there is an emphasis on "love of neighbor" in the sense of caring, concern and respect for persons.³⁶

"THE SILENT SCREAM"

This 1985 anti-abortion film depicts the movement of a 12-week-old fetus as purposeful and interprets these reflexes during abortion as indicative of pain.

The film distorts the truth. It attempts to engage the viewer's empathy for the fetus without reference to the pregnant woman. According to medical experts from the American College of Obstetrics and Gynecologists, a 12-week-old fetus cannot feel pain because there is no conscious awareness prior to the seventh month of pregnancy when the cerebral cortex is ready to function continuously.³⁷

WAITING PERIODS

Anti-abortion advocates frequently attempt to impose a waiting period between a pregnant woman's visit to her doctor or reproductive health care clinic and when she obtains an abortion.

This waiting period requirement again implies that women make decisions concerning abortion casually and will take the time to thoughtfully consider their decisions only if it is legally mandated. Waiting period requirements impose a great emotional burden on pregnant women by increasing the time, the health risks, and the cost involved in obtaining an abortion.

The health risk to pregnant women from legal abortion rises as gestational age increases. More than half of all abortions are performed at or before eight weeks of pregnancy. At 11 or 12 weeks of pregnancy, abortion is three times more dangerous. Abortions performed after the first trimester involve greater risk than those performed during the first trimester.³⁴

More than 90 percent of nonmetropolitan counties are without abortion providers. This leaves the 83 percent of women who live outside metropolitan areas without immediate access to abortion services.³⁵ Requiring a second trip to an abortion provider can increase transportation and lodging costs and may also involve additional time missed from work or school.

Conclusion

For many years, our nation has been enmeshed in a controversy over the freedom of women to choose safe and legal abortion. Opponents of abortion rights assert that human life or personhood begins at conception. A fetus is thus viewed as a "person" and abortion is the equivalent of "murder." The foundation of their argument rests not on biological fact but on religious beliefs that all faith groups do not share. This shows most clearly that abortion is largely a religious issue.

Abortion rights opponents are attempting to place into secular law restrictions on abortion rights based on their theological belief that human life or personhood begins at conception. Such laws prohibit people who do not share that theological belief from making decisions concerning unplanned pregnancies according to the teachings of their faiths. These laws also violate the religious freedom of those people who believe abortion may be a moral alternative to a problem pregnancy.

Because some churches made abortion a religious issue, other religious groups have responded by defending reproductive freedom as a matter of religious liberty. The diversity of religious views in this country on the sensitive issue of abortion requires that the abortion decision must remain with the individual, to be made on the basis of conscience and personal religious principles and free from government interference.

The issue of abortion continues to be discussed, debated, and even, unfortunately, sensationalized. In hopes of keeping the controversy honest, we ask opponents of abortion rights to commit to a common

linguistic ground where terms and imagery reflect the truth. To settle this controversy, we must also commit to a compromise which is considerate of each side's legitimate beliefs.

Just such a compromise was constructed by the 1973 Supreme Court decision in the matter of *Roe v. Wade*. The Court carefully mediated between (1) a woman's fundamental interest in personal privacy which includes the decision to terminate a pregnancy; (2) every state's interest in promoting the health of its female citizens; and (3) a state's interest in the potential life of a fetus that is viable.

The language and efforts of abortion rights opponents dismantle this compromise and demonstrate no respect for women's fundamental rights and their ability to make wise, judicious, and moral decisions. Their actions also interject government involvement into the middle of family decision-making.

As this controversy continues, the entire nation loses.

- The United States lags far behind many other countries in the development of new methods of contraception and, as a result, the number of unintended pregnancies, unwanted children, and abortions is higher than necessary.⁴⁰
- Teenage pregnancy, birth, and abortion rates in the United States are among the highest of developed countries.⁴¹
- The number of pregnant women who received no prenatal care increased fifty percent from 1980 to 1987.⁴²
- The United States ranks behind nineteen other industrialized nations in the rate of infant mortality.⁴³ Infant mortality rates in cities such as Washington, D.C., Detroit, and Philadelphia are higher than in some third world countries. The situation is especially tragic for African American infants who are more than twice as likely to die as white infants.⁴⁴

While our nation struggles endlessly with the divisive issue of abortion, vital reproductive health care needs go unmet. Not until a woman's constitutional right to reproductive freedom is secure—facing no threats, requiring no defense—can we work solely and aggressively to solve the numerous reproductive health care problems that trouble our nation.

Without respect for reproductive freedom, our nation's overwhelming reproductive health care problems will persist.

The Religious Coalition for Abortion Rights

The Religious Coalition for Abortion Rights is a national nonprofit, nonpartisan coalition of 35 Protestant, Jewish, and other denominations and faith groups. While religiously and theologically diverse, we are unified in our commitment to preserve reproductive freedom.

The Coalition believes that the right of reproductive freedom is intrinsically tied to religious liberty. We oppose any attempts to enact into secular law restrictions on abortion based on one particular theological definition of when the fetus becomes a person.

Because of the range of religious beliefs on this sensitive issue, the abortion decision must remain free from government interference. The decision must remain with the woman, to be made in accordance with her conscience and personal religious principles and in conjunction with her family, her clergy and her doctors.

The Religious Coalition for Abortion Rights was formed by ten denominations and faith groups in 1973 as a response to religiously-based efforts aimed at overturning the landmark Supreme Court decision, *Roe v. Wade*. Most of our member groups have held pro-choice positions for a number of years—and worked for the reform of restrictive state laws prior to 1973.

Based in Washington, D.C., we have affiliates and active groups across the country. Our Clergy for Choice and Voices for Choice networks effectively educate and mobilize people in the pews. The Religious Coalition for Abortion Rights is the only national pro-choice organization with an initiative targeted toward women of color. Our

Women of Color Partnership Program serves as a vehicle through which African American, Latin American, Asian/Pacific Islander American, and Native American women can become actively involved as decision makers in the reproductive rights movement.



For additional information, call or write:

Religious Coalition for Abortion Rights
100 Maryland Avenue, NE
Washington, DC 20002
(202) 543-7032

NOTES

1. R.B. Gold, *Abortion and Women's Health: A Turning Point for America*, (New York, NY: Alan Guttmacher Institute, 1990) 22-23.

A full term pregnancy lasts about 40 weeks. Pregnancy is divided into three trimesters, each approximately 12-14 weeks long.

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15. Lord, "Desperately Seeking Baby: Ten Million Americans Are Struggling to Have Children," *U.S. News & World Report*, 5 October, 1987, 64.
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18. *The Human Life Bill: Hearings Before the Subcommittee on Separation of Powers of the Senate Committee on the Judiciary*, 97th Cong., 1st sess., 1981.
19. National Abortion Rights Action League (NARAL), *Who Decides? A State by State Review of Abortion Rights*, (Washington, D.C.: National Abortion Rights Action League, 1989) 28, 38, 53.
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29. K.L. Moore, *The Developing Human: Clinically Oriented Embryology*, 3d ed., (Philadelphia: W.B. Saunders Company, 1982) 49.
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31. Nefesh occurs more than 700 times in the Hebrew Bible as the usual term for the living human being. Illustrations are in Ezekiel 37:8-10 and Genesis 2:7.
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34. N. Adler, et. al, "Psychological Responses After Abortion," *Science*, 248:1990, 41.
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37. American College of Obstetrics and Gynecologists, "Statement on Pain of the Fetus," 13 February, 1984.

"We know that the cerebellum attains its final configuration in the seventh month and that myelinization (or covering) of the spinal cord and the brain begins between the 20th and 40th weeks of pregnancy. These, as well as other neurological developments would have to be in place for the fetus to perceive pain. To feel pain, a fetus needs neurotransmitted hormones. In animals, these complex chemicals develop in the last third of gestation. We know of no evidence that humans are different."

38. R.B. Gold, *Abortion and Women's Health*, op. cit. (see note 1) 30-31.

39. S.K. Henshaw and J. Van Vort, "Abortion Services," op. cit. (see note 6).

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To: Alaska State House
From: Jamie Bollenbach, Executive Director, AKCLU
Date: April 25, 1991

COMMENTS ON HB 268

The ACLU commends the representatives of the Alaska House who sponsored this courageous legislation protecting a woman's right to choose. This laudable stand in favor of women's rights appears in the midst of a national political climate where ten state legislatures have already attempted to criminalize abortion. HB 268 properly recognizes that abortion is a debate that must be decided on the level of individual conscience, and not in the frantic halls of government.

HB 268 also establishes that reproductive choice must not become a choice only for the wealthy. The provisions protecting existing funding are critical to maintaining equal protection for impoverished women.

There is no doubt that the great majority of Alaskans also support the right of reproductive choice. The people of the state voted to maintain public funding of abortions for impoverished women who sought them. Alaska is known nationally as one of the most progressive states in protecting women's right to choose, and this legislation will help maintain this tradition.

As with any regulation or legislation affecting reproductive rights, there are a number of complex legal considerations that must be taken into account in passing this type of protective legislation. New language must be carefully scrutinized to ensure that it does not accidentally weaken existing statutory and constitutional protections. Although the U.S. Supreme Court has recently cast some doubt on federal constitutional protection for reproductive rights, cases such as Planned Parenthood v. Danforth (governing the rights of minors) and Roe v. Wade are considered the existing legal standard for Alaska under the privacy provision of the state constitution. Some time should be allowed for careful evaluation to make certain that this legislation does not unintentionally interfere with existing constitutional law.

The debate over abortion can be painful, emotional, and draining. What has become clear over the years is that the great majority of Alaskans believe that government should not decide this issue for the women facing the difficult choices that arise from an unwanted pregnancy. The responsibility of government, recognized in this legislation, is to see that the option of abortion remains safe, legal, and accessible.



ALASKA CHAPTER
NATIONAL ASSOCIATION OF
SOCIAL WORKERS

8923 Tanis Drive
Juneau, Alaska 99801
(907) 789-7099

Executive Director
William Diebels, LCSW

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POSITION PAPER
SB 249, REPRODUCTIVE PRIVACY ACT

The Alaska Chapter of the National Association of Social Workers (NASW) strongly supports the passage of SB 249, Reproductive Privacy Act. On a national basis, NASW's Delegate Assembly established a policy affirming a woman's right to choose whether to have an abortion. NASW's position on abortion is to support self-determination, or a woman's right to make her own choice about abortion.

The Honorable Justice Blackmun wrote, "... Every year many women, especially poor and minority women, would die or suffer debilitating physical trauma, all in the name of enforced morality or religious dictates or lack of compassion, as it may be..." He warned of the danger of overturning "a constitutional decision that secured a fundamental personal liberty to millions of persons."

The Alaska Chapter of NASW believes that this bill will continue to guarantee women their rights. We support SB249 in its entirety. Reproductive privacy, including abortion, is a matter of individual conscience, not governmental coercion. Reproductive choices of Alaskans must be protected by law.

Respectfully submitted,

Nina Kinney, MSW, LCSW
President, Alaska Chapter

AMERICAN MEDICAL ASSOCIATION

Resolutions

No. 49 RIGHT TO PRIVACY IN TERMINATION OF PREGNANCY Introduced by California Delegation

HOUSE ACTION: FOLLOWING EXISTING POLICY, WITH ADDITION OF THIRD PARAGRAPH, REAFFIRMED IN LIEU OF RESOLUTION 49:

Abortion is a medical procedure and should be performed only by a duly licensed physician in conformance with standards of good medical practice and the laws of the state.

No physician or other professional personnel shall be required to perform an act violative of good medical judgment or personally held moral principles. In these circumstances good medical practice requires only that the physician or other professional withdraw from the case so long as the withdrawal is consistent with good medical practice.

The American Medical Association supports the position that the early termination of pregnancy is a medical matter between the patient and the physician, subject to the physician's clinical judgment, the patient's informed consent and the availability of appropriate facilities.

RESOLVED, That the American Medical Association support the position that no government nor governmental agency should be interposed between a patient and her physician with regard to the termination of a pregnancy.

No. 50 UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD Introduced by Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island and Vermont Delegations

HOUSE ACTION: REFERRED TO BOARD OF TRUSTEES FOR DECISION

RESOLVED, That the American Medical Association Board of Trustees monitor the United Nations Convention on the Rights of the Child; and be it further

RESOLVED, That the AMA lend its support to the treaty if the policy and articles of the treaty remain consistent with AMA policy, and/or if there are particular articles that are not consistent with AMA policy, the AMA voice its concern to the United States government which can exercise its right to request a reservation.

No. 51 STATE MEDICAL PRACTICE ACT - COMMUNITY-BASED MEDICAL SERVICES Introduced by American Academy of Pediatrics

HOUSE ACTION: REFERRED TO BOARD OF TRUSTEES FOR REPORT BACK TO THE HOUSE OF DELEGATES

RESOLVED, That the American Medical Association develop state model legislation pursuant to incorporating the performance of community-based medical services, both health care delivery and consultative in nature, when performing outside of office, hospital and home settings as standard elements of the state medical practice act; and be it further

RESOLVED, That the AMA encourage each state medical society to urge the enactment of such legislation in their respective states.

- AMA Position on Abortion -

12. RESOLUTION 158 -- POLICY ON ABORTION

Resolution 158 called upon the AMA to adopt the position that the issue of support or opposition to abortion is a matter for members of the AMA to decide individually, to take no action which may be

construed as an attempt to alter or influence the personal views of individual physicians regarding abortion procedures, and to neither promote nor oppose legislative proposals relating to the legality of abortion procedures.

The House of Delegates amended Resolution 158 to read as follows (deletion of third Resolve):

Resolved That it is the position of the American Medical Association that the issue of support of or opposition to abortion is a matter for members of the AMA to decide individually, based on personal values or beliefs; and be it further

Resolved, That the AMA take no action which may be construed as an attempt to alter or influence the personal views of individual physicians regarding abortion procedures.

RESOLUTION 158 ADOPTED AS AMENDED

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- incentives for employers to establish quality child care programs at or near the work site.

HEALTH AND SAFETY

NEA supports-

- establishment and funding of programs and standards to protect children from physical, sexual, or emotional abuse and/or neglect;
- legislation to assist communities in developing programs to help parents protect children from danger, ill health, or hunger;
- federal requirements that manufacturers add a blistering agent to all poisonous household products;
- federal funding for local development and delivery of curriculum about the human immunodeficiency virus (HIV) to empower students to protect themselves from acquired immunodeficiency syndrome (AIDS);
- cooperative public and private efforts for the identification, location, and return of missing children;
- establishment and funding of support programs for homeless or abandoned children;
- strong, effectively enforced laws governing the employment of minors in order to protect young people's health and safety as well as their time for education;
- federal assistance to schools and communities for the establishment and funding of education programs which address prevention of substance abuse and rehabilitation of victims;
- federal assistance to schools and communities for implementation of effective youth suicide prevention programs;
- federal support for school meal programs to provide adequate, appealing, and nutritious foods;
- provision of nutrition assistance to families unable to meet basic nutrition needs;

- minimum standards for youth camps and school bus safety;
- court-assured payment of designated child support.

YOUTH SERVICES

NEA supports-

- collaborative community efforts including programs to increase citizen and business group involvement in assisting and reclaiming youth who have dropped out of school;
- pregnancy-related counseling and support services, including prenatal care, for youth;
- joint ventures by public education and its leaders, business, labor, and the community at large to establish at the local level appropriate policies and incentives and to implement exemplary and competitive programs, including expansion of in-school and school-related work experiences, to prepare in-school and out-of-school youth for meaningful and rewarding employment.

NEA opposes-

- a subminimum wage for youth.

ii. Comprehensive National Health Policy

POPULATION AT LARGE

NEA supports-

- a comprehensive, universal national health insurance system provided by public and private agencies to assure health care, including preventive services, to all;
- provision of employer-paid health insurance for all employees and their dependents;
- a national health care plan including improved access to a full range of health services for all, including children, the elderly, the mentally and/or chronically ill, pregnant women and girls and mothers of infants, the mentally and

physically abused, substance abusers, and the unemployed;

- a national program of long-term care for the chronically ill, including those with cognitive or mental impairments;
 - containment of health care cost increases;
 - a major federal commitment to HIV research leading to development of a preventive agent and the discovery of effective treatments;
 - strict federal standards for staffing, safety, health care, and nutrition services provided by nursing homes;
 - strengthened occupational health and safety standards and programs with diligent enforcement;
 - tax exemption for employer-paid health insurance.
- NEA opposes-
- taxation of health insurance or health benefits;
 - shifting of health care costs to the insured.

MEDICARE/MEDICAID POPULATIONS

NEA supports-

- a strong Medicare/Medicaid system with protected benefits;
- Medicare as a social insurance program available to eligible school employee groups where initiated by those groups in states in which public school employees are not covered by Medicare.

NEA opposes-

- any means test for Medicare;
- any shift of the cost of health care under Medicare/Medicaid to the beneficiary and/or his or her family;
- any new barrier to eligibility for benefits under Medicare;
- mandatory coverage of public employees under Medicare for employee groups that have Medicaid coverage.

III. Constitutional, Civil, and Human Rights Protection

NEA supports-

- preserving and strengthening basic civil and human rights under law;
- eliminating barriers restricting the individual exercise of rights;
- guaranteeing the right to a free and appropriate public education to all children including the homeless;
- vigorous enforcement of civil rights laws, including desegregation activities and programs for American Indian/Alaska Natives, through full funding and appropriate administration actions;
- full equality and opportunity—economic and educational—for all, including the addition of the Equal Rights Amendment to the Constitution;

- the use of affirmative action to redress historical patterns of discrimination;
- academic freedom.

NEA opposes-

- infringement of due process rights;
- infringement of the principles of religious freedom through the introduction of sectarian practices in the public schools;
- efforts to restrict or end federal court jurisdiction in civil rights matters, including restrictions on the use of busing as an available option to achieve desegregation;
- a constitutional amendment designating English as the official language of the U.S.;
- arbitrary restrictions on the civil rights of persons who test positive for the HIV;
- mandatory testing of school employees for the HIV;

NEA Position on Abortion

adult students and educators may establish personal relationships. However, such relationships should be voluntary and not be used to coerce or influence others for personal advantage. Thus, the Association believes that sexual relationships between a faculty member and a student currently enrolled in the faculty member's course, or under the supervision or direction of the faculty member, are unprofessional. The Association urges its affiliates in institutions of higher education to establish strong policies declaring such relationships unprofessional. (89)

I-21. Family Planning

The National Education Association supports family planning, including the right to reproductive freedom.

The Association urges the government to give high priority to making available all methods of family planning to women and men unable to take advantage of private facilities.

The Association further urges the implementation of community-operated, school-based family planning clinics that will provide intensive counseling by trained personnel. (85, 86)

I-22. Sexual Assault

The National Education Association supports efforts that will prevent and protect members of our society from becoming victims of sexual assault. The Association urges states to develop a systematic process for gathering evidence when such assault occurs. Further, the Association supports fair and equitable treatment by health, hospital, and law enforcement agencies for sexual assault victims. The Association believes that it is a violation of the victims' right to privacy to have their past sexual history admitted as

evidence in assault cases. The Association recognizes the importance of and urges the rehabilitation of the assailant and the protection of due process rights for both the victim and the assailant. (81, 85)

I-23. Victims of a Crime

The National Education Association believes that victims of a crime should be treated with dignity and compassion, without the fear of intimidation.

The Association believes that it is essential that victims be notified of and have the right to be present/represented at all legal proceedings of the accused, including parole hearings.

Victims and their families must have access to free counseling and support services. They must also be made aware of available services and programs. The Association further believes that such programs should be funded by the appropriate governmental agencies. (87, 90)

I-24. Invasion of Privacy

The National Education Association believes that every individual has a right to privacy. The Association continues to be concerned about the indiscriminate surveillance of citizens or groups by private and public agencies. The Association condemns the use of information gathered and stored and the exchange of such information without explicit release from the person or persons involved.

The Association recognizes that such rights to privacy and confidentiality must be guaranteed through federal and state legislation. The Association urges its affiliates to seek legislation that will guarantee these rights. (70, 86)

I-25. Military Veterans

The National Education Association believes that many veterans of military conflicts are suffering physical, social, and psychological problems because of their involvement in combat and related military activities, the full effects of which are still not known. The Association urges that federal and state legislation continue to be enacted to increase benefits and programs, including retirement benefits, for these military veterans to meet their needs now and in the future. (81, 87)

I-26. Highway Safety

The National Education Association believes that people should be protected from death and injury that result from the operation of motor vehicles by drivers under the influence of alcohol, drugs, or other mind-altering substances. To this end, the Association urges its members and affiliates to —

- a. Support enactment and enforcement of effective and equitable legislation regulating driving while under the influence
- b. Advocate appropriate educational experiences for students regarding the effects of driving while under the influence
- c. Support recognized community and school groups in their efforts to reduce death and injury from accidents caused by drivers under the influence
- d. Support legislation requiring mandatory restraint of all passengers in motor vehicles, excluding school buses
- e. Advocate for the continued research and development of safety features and passive restraint systems for passengers in school buses and for the inclusion of those features shown to be effective. (82, 88)

I-27. Control of Guns and Other Deadly Weapons

The National Education Association believes that stricter legislation is needed to control guns and other deadly weapons. The Association supports legislation that provides for prescriptive controls on the manufacture, distribution, and sale of handguns, with particular efforts to eliminate easily obtained, low-cost handguns — commonly described as Saturday Night Specials.

The Association further believes that the sale and possession by the private sector of automatic and semiautomatic paramilitary weapons, such as UZI submachine guns and AK-47 assault rifles, should be illegal.

The Association believes that severe penalties should be enacted and strenuously enforced for criminal actions involving guns and other deadly weapons, especially in school settings, and for those who profit from the illegal sale and distribution of these weapons. (82, 89)

I-28. Nuclear Power Plants and Radioactive/Chemical Pollutants

The National Education Association believes that strict monitoring of nuclear power plants and radioactive/chemical pollutants should be required. The Association urges the development and implementation of new technologies for the safe transport and recycling of nuclear and chemical wastes. It further urges regulation of the U.S. Department of Energy by an independent agency to reduce the further accidental radioactive pollution of our environment.

The Association supports programs that would educate the public to the dangers and

bers when in the appropriate best interest of the Association. When this is not in the appropriate best interest of the Association, unionized labor will be given employment preference before nonunion labor for the next two years. Reevaluation of this new business item will take place at the 1992 NEA Representative Assembly. (1990-52)

Alternative Food Containers

The NEA will investigate the use of alternatives to nonrecyclable or nonreusable food containers and will incorporate the use of these alternatives into the planning of future Representative Assemblies. (1990-53)

Certified Emergency Medical Team at Representative Assembly

The NEA will provide for a certified emergency medical team on site at the Representative Assembly and transportation to and from an NEA-designated hospital during the Representative Assembly. (1990-62)

Habitat for Humanity

The NEA shall study the feasibility of coordinating with Habitat for Humanity, an annual, one-day, voluntary, pre-convention housing work session for NEA delegates. (1990-80)

Special Funds at Representative Assembly

The NEA, as possible, will provide each state delegation a list of special funds that will be collected at the Representative Assembly at least three (3) months in advance in order to encourage such delegations to collect donations from their members at home. (1990-81)

Representative Assembly Fundraising Activity for Needy Families

The NEA, with appropriate cooperation of local assistance agencies in advance of the NEA Representative Assembly, shall establish a fundraising effort at the NEA Representative Assembly to benefit the food pantries or equivalent agencies that provide assistance to needy families and individuals residing in the city or area where the Representative Assembly is being held. This shall be an activity of the NEA Representative Assembly for a period of three years, after which time the activity shall be evaluated by the NEA Board of Directors for consideration as to the feasibility of continuing this activity. (1990-82)

Dissemination of Convention Materials

The NEA will seek new ways of disseminating convention materials through use of current technologies and environmentally sound practices for the 1991 convention. (1990-99)

GOVERNMENT RELATIONS

Health Care for All Americans

The NEA will develop and implement an action plan to attain the goal of resolution A-17, National Health Insurance, to gain universal health care for all Americans. A report on this plan and the status of its implementation will be presented to the 1991 Representative Assembly. (1990-1)

Memorial for Victims of Korean Conflict

The NEA supports the effort to create a memorial for those who died in the Korean conflict and encourages its members and all other Americans to join those working to commemorate those who gave their last full measure of devotion. (1990-1)

Rural Policy Development

The National Education Association shall work through the political process to attempt to establish rural policy development as a national priority, with emphasis on promoting rural education through whichever agencies or departments are most appropriate. (1990-6)

Sanctions Against South Africa

As a fitting tribute to Nelson Mandela's visit to our country, the NEA continues to maintain its support for United States and international sanctions against South Africa with such time as the struggle to end apartheid has become irreversible. The NEA will communicate its support for sanctions in writing to the U.S. president and Congress. (1990-46)

Nutritional Guidelines for School Lunch Programs

The NEA will work with appropriate federal agencies to modify the nutritional guidelines for school lunch programs to follow the dietary recommendations established by the American Dietetic Association (ADA), American Cancer Society, and American Heart Association for sodium and fat as well as other nutrients. Fur-

ther, the amount of sodium and fat in one meal shall not exceed a prorated amount of the limit set by the recommended daily allowances that age group.

A report on these activities will be provided to the 1991 Representative Assembly. (1990-54)

Loss of Social Security and Pension Credit

The NEA shall investigate and report to NEA Board of Directors by its May 1991 meeting any legislative initiatives that address problems of loss of Social Security and pension credit for members who leave the work force for care for children or disabled family member. (1990-58)

The NEA will oppose any legislation which will erode the status of Roe v. Wade and/or which impedes access to and choice of reproductive health care options by providing technical assistance to state affiliates. (1990-65)

Amendment of Offset Provisions

The NEA shall take the lead in initiating renewed campaign to amend the employment and spousal offset provisions of the Social Security Act through increased communication (NEA Today) and government relations activities. (1990-70)

Census Count

The NEA shall actively seek to coordinate efforts with other interested organizations to pressure the U.S. Census Bureau to ensure complete count of all residents in the 1990 census. (1990-71)

MEMORIAL

The Association urges its state affiliates to become involved in the promotion, expansion, and implementation of a fine arts program in the curriculum. (80, 90)

C-28. Conflict Resolution Education

The National Education Association believes that many television programs, movies, computer games, and other cultural influences condition children and youth to accept interpersonal and societal violence as a means of resolving conflicts.

The Association further believes that such conditioning has a negative impact on the attitudes and behavior of many young people and offers them a socially unacceptable response to conflicts.

The Association supports the development of strategies, instructional materials, and activities that will encourage nonviolent resolution of interpersonal and societal conflicts. (86)

C-29. Law-Related Education

The National Education Association supports law-related education as an integral part of the curriculum within the public schools.

The Association encourages teachers, lawyers, court personnel, and others to work together to develop appropriate materials, including information about the justice system and constitutional issues, in order to teach students to be responsible citizens. (84, 87)

C-30. Family Life Education

The National Education Association believes that the developing child's sexuality is continual-

ly and inevitably influenced by daily contacts, including experiences in the school environment. The Association recognizes that sensitive sex education can be a positive force in promoting physical, mental, and social health and that the public school must assume an increasingly important role in providing the instruction. Teachers must be qualified to teach in this area and must be legally protected from censorship and lawsuits.

The Association urges that formal sex education should include parent orientation and be planned and implemented with careful attention to developmental needs, appropriateness to community settings and values, and respect for individual differences.

The Association urges its affiliates and members to support appropriately established sex education programs, including information on sexual abstinence, birth control and family planning, diversity of sexual orientation, parenting skills, prenatal care, sexually transmitted diseases, incest, sexual abuse, sexual harassment, the effects of substance abuse during pregnancy, and problems associated with and resulting from preteen and teenage pregnancies.

To facilitate the realization of human potential, it is the right of every individual to live in an environment of freely available information, knowledge, and wisdom about sexuality. (69, 89)

C-31. Alternative Programs for At-Risk and/or Special Needs Students

The National Education Association recognizes that there must be increased development and maintenance of alternative programs to meet the needs of at-risk and/or special needs students. The Association urges increased support for the identification of these students.

Programs should emphasize a broad range of activities for responding to students' differing behavioral patterns, interests, needs, and learning styles. These programs must be evaluated on stated objectives. Teachers in these programs must have a major role in designing the objectives and evaluations and working with appropriate school and community personnel to execute these objectives and evaluations.

The Association urges its affiliates to seek adequate compensation, planning time, materials, and facilities for teachers and counselors in these programs.

The Association supports the efforts of its affiliates to negotiate and legislate for the training of teachers seeking additional certification and hiring of an increased number of teachers with education in special areas.

The Association encourages its state affiliates to seek legislation that would require any person offering services to remediate, correct, or ameliorate reading, speech, language, learning disabilities, or related problems to be licensed under regulations of each state's department of public instruction or other appropriate agency. (77, 89)

C-32. Discriminatory Academic Tracking

The National Education Association believes that the use of discriminatory academic tracking based on socioeconomic status, race, or sex must be eliminated in all public school settings. The Association urges its affiliates to oppose these practices. (88)

C-33. Gifted, Talented, and Creative Students

The National Education Association believes there must be increased development of fully

funded educational programs for gifted, talented, and creative students.

The Association recognizes its responsibility to aid educators in selecting reliable methods of identifying and teaching these students. Such identification shall not discriminate on the basis of gender, socioeconomic status, or ethnicity. The Association also believes that training programs in gifted and talented education must be provided for appropriate school employees.

The Association urges local and state affiliates to encourage such programs and methods to ensure that these special need areas are met. (80, 89)

C-34. Educational Programs for Limited English Proficiency Students

The National Education Association believes that limited English proficiency (LEP) students must have available to them programs that address their unique needs and that are committed to providing equal opportunity to all students, regardless of their primary language.

The Association urges that the programs for LEP students emphasize proficiency (the ability to speak, read, write, and reason in English) as a primary goal to enable these students to reach their full potential in an English-speaking society. At the same time, meaningful instruction should be provided in all other curriculum areas.

The Association urges that those students whose primary language is other than English be placed in bilingual education programs to receive instruction in their native language from qualified teachers until such time as English proficiency is achieved. If no bilingual programs are available, these students should be taught in

MALA: Backed

Continued from Page B-1

age, which has initiated several research exchanges between Alaska and northern nations. He said he would like to encourage exchanges on the state level so the department can benefit from seeing how health and social problems are handled elsewhere.



Lincoln said she is worried that Mala may spend too much time working on international concerns and ignoring rural health matters back home.

"I don't believe we have the time or the money to be sending groups of people out of the country," she said.

Rep. Mark Boyer, D-Fairbanks, urged Mala to take a larger role in the controversy over the state's mental-health lands trust. Boyer said he is troubled by the lack of progress Hickel's task force has made on the issue. It has only met once.

Mala, 44, was one of Hickel's first appointees and is one of two Natives in the governor's Cabinet.

Mala backed for commissioner Committee questions stand on abortion, service to villages

By BRIAN S. AKRE
The Associated Press

JUNEAU — A House committee on Monday recommended the legislature confirm Dr. Ted Mala as commissioner of the state Department of Health and Social Services, despite reservations about his stand against abortion.

Mala noted there are waiting lists of couples who want to adopt babies, and he implied the department might consider encouraging women with unwanted pregnancies to give birth and put their babies up for adoption.

"That didn't sit very well with some of the members on the committee and some others who were there," said Rep. Georgianna Lincoln, R-Rampart and co-chairwoman of the Health, Education and Social Services Committee.

Mala said the Hickel administration has not taken a position on abortion. He told the committee he is preparing a report for Gov. Wally Hickel that will outline options in dealing with the abortion issue. Hickel, a Catholic, opposes abortion.

Mala said he considers abortion a last resort.

Lincoln said she and other lawmakers are worried that Mala, with Hickel's consent, might try to restrict the use of state welfare money to provide abortions for poor women.

"If there are options being put together for the governor, I would assume those options are going to go in an anti-abortion vein," she said.

Mala also told the committee he wants to establish a state health plan and encourage people not to turn to govern-



Ted Mala

ment to solve every social problem.

"People have to start taking more responsibility for their own lives," he said. "We're not going to take the attitude that social services should do everything for us."

Government sometimes has made problems worse "by trying to fix everything with money," especially in Native villages, said Mala, an Eskimo.

Mala is former director and founder of the Institute of Circumpolar Health Studies at the University of Alaska Anchorage.

Please see Page B-3, MALA

Study details who gets abortions

The Associated Press

WASHINGTON — Hispanic and black women, women with low incomes, those living with someone they are not married to, and those in school are statistically more likely to undergo abortions than women in general, according to a private survey.

Firm statistics are not available on the number of abortions performed each year nor on who has them. Moreover, the survey by The Alan Guttmacher Institute confirms that most abortions are performed on white, middle-class women because they make up the bulk of the population of women of childbearing age.

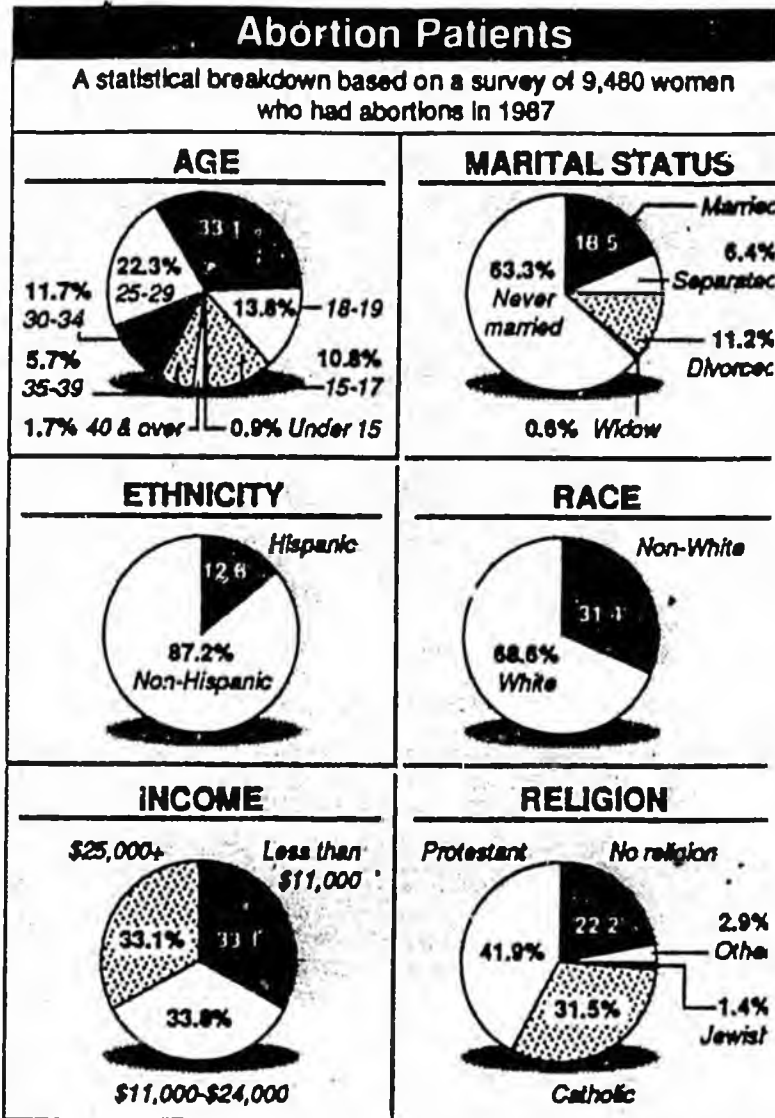
However, the extensive survey by the New York-based, non-profit group that studies reproductive issues suggests that women in various categories have a statistically disproportionate share of abortions relative to their raw numbers.

For example, it found that non-white women make up 16.7 percent of the childbearing-age population, but accounted for 31.4 percent of the abortions.

White women accounted for 88.6 percent of those seeking abortions, but 83.3 percent of the childbearing-age population, considered 15-to-44 for purposes of the survey.

And it found that women with family incomes below \$11,000 accounted for 33.1 percent of those receiving abortions although they made up only 29.2 percent of all women of childbearing age.

The federal Centers for Disease Control in Atlanta estimates there were 1,328,000 abortions in the United States in 1985, the most recent year for which it has numbers. The Guttmacher



The Associated Press

er Institute estimates 1,588,550 that year.

No one questions that the number has increased since the Supreme Court legalized abortion in 1973. The court is hearing arguments April 26 in a Missouri case that both sides agree could result in the reversal, or weakening of that landmark Roe vs. Wade decision.

The Guttmacher Institute surveyed 9,480 women who obtained abortions at hospitals, clinics or doctors' offices during 1987 in an effort to find out who was obtaining the services.

It selected 103 facilities in what was intended as a statistically valid national sample base — 21 hospitals and 82 clinics and physicians' offices — and arranged for questionnaires to be given to the 11,313 women who showed up for abortions during a 12-day period.

Filling out and mailing in

the questionnaire was voluntary and done anonymously and privately by the woman and a large number — 9,480 — returned completed questionnaires.

Unmarried women living with a man constituted 17 percent of the abortion clients although they made up only 3.4 of all childbearing age women.

Women attending school constituted 31.1 percent of those seeking abortions, but 20.5 percent of all women childbearing age.

Most women cited more than one factor in their decision to have an abortion. Among the reasons were concerns about how motherhood would change the lives, financial problems, single parenthood, the responsibility of parenthood, others knowing they were pregnant, maturity and how many children they already had.

Facts on Reproductive Rights

Fact Sheet #3

ABORTION: COST, FUNDING AND ACCESS

The Problem

America's health care system deprives poor women, particularly women of color and rural women, of not only the right to basic health care, but also the access to reproductive choice. This is because access to health care, including reproductive health care, is generally dependent on one's ability to pay for it.¹ In contrast to citizens of other developed countries, a significant number of Americans must rely solely on their own resources to pay for health care.² Nearly 18% of all Americans have no health insurance and millions of others have coverage so limited that they may as well be uninsured.³ The figures are even worse for Americans of color.⁴ Safety net coverage for those without insurance is inadequate. Medicaid covers less than half of those below the poverty level.⁵ Almost 88% of the uninsured are working poor and their families, those who make too much to qualify for Medicaid yet not enough to live above the poverty level.⁶

Increasingly, poverty and the consequent lack of adequate health care are suffered primarily by women and children. Poverty is disproportionately prevalent among women and children of color⁷ and among rural women and children.⁸ Two out of three adults living below the poverty level are women and more than half of poor families are headed by women.⁹ Of all women aged 18-24, 30% have no insurance coverage.¹⁰ Of women aged 15-44 living below the poverty level, 36% are uninsured.¹¹ Among women in the same age group living at 100-149% of the poverty level, 30% are uninsured.¹² A woman's lack of insurance affects her children's health as well. Babies born to women without insurance are 30% more likely to die or be seriously ill at birth.¹³

Funding Limitations

Poor women must thus deal with inadequate health care funding for all their health problems. In the area of reproductive health, additional hardships have been imposed. Obstetricians and gynecologists do not participate in Medicaid to as great an extent as other types of physicians.¹⁴ The greatest impediment to poor women receiving proper reproductive care is that even where they have access to an "ob-gyn" who does accept Medicaid payment, the federal government still bars Medicaid funding of abortions except in cases where the woman's life is in danger. (In October 1989, President Bush vetoed a bill passed by Congress that would have permitted Medicaid funding of abortions in cases of promptly reported rape or incest.) Although the states are free to pay for abortions that do not meet the federal standards, 30 states provide funding only when the woman's life is endangered,¹⁵ 8 states provide funding in certain additional circumstances (rape, incest or grave fetal abnormalities),¹⁶ and only 12 states fund all abortions necessary to preserve or protect a woman's health.¹⁷ Ironically, 44 states and the District of Columbia extend Medicaid coverage to all pregnant women and infants living in families with incomes below the poverty level; the only non-covered health care is pregnancy termination, except in limited circumstances.¹⁸

In 1987, \$64 million in public funds went to abortions, but the federal government contributed less than 1% of that.¹⁹ Nearly all of the state-funded abortions were performed in states that fund all medically necessary abortions,²⁰ and none of the states that provide funding only when a woman's life is endangered used state revenues for abortion services.²¹ Such restrictions on funding are a major cause for Medicaid-eligible women either to delay their abortions while they save for the fee²² or to bear unwanted children.²³

The lack of federal abortion funding is especially disquieting when compared to federal funding of sterilization. In 1987, \$65 million in government money went to fund sterilization procedures.²⁴ The federal government provided 97% of these funds (compared to less than 1% for abortions, see above), 91% through Medicaid.²⁵ The government's willingness to fund sterilization must be viewed against the shocking sterilization abuses which were uncovered in the 1970's -- abuses aimed at women of color and poor women. Some of the horrifying events that occurred involved public assistance officials tricking illiterate Black welfare recipients into consenting to sterilization of their teenage daughters; doctors agreeing to deliver babies of Black Medicaid recipients or perform abortions on condition that the women be sterilized; and doctors performing radical hysterectomies on Native American women under age 21 without informed consent.²⁶ Non-English speaking women were even less likely to have given informed consent because of communication difficulties. As of 1983, 25% of women of color had been sterilized, compared to 16% of white women.²⁷ Many women who are being sterilized today still are not being informed that sterilization is not reversible. One 1988 study of low-income clinic patients planning to be sterilized revealed that only between 64 and 70 percent knew that sterilization makes it impossible to have children in the future.²⁸

Raising the money for an abortion can be difficult for poor women. The cost of an abortion ranges from \$125 to over \$2,000.²⁹ Even if a woman is covered by Medicaid she often must pay cash up front, something very difficult for poor women to do.³⁰ Early abortions cost less and are safer than abortions performed later in the pregnancy.³¹ Thus, delays caused by lack of funds increase the final cost of the abortion and subject women to unnecessary risk. Financial problems may also increase the risks of later abortions. Among the methods for second trimester abortions, dilation and evacuation (D&E) is the fastest and safest.³² D&E's, however, are not widely available and may be too expensive for poor women.³³ If anti-choice forces are able to pass laws like those recently upheld in Webster v. Reproductive Health Services,³⁴ the cost of an abortion will increase even more, placing a greater burden on poor women. It is estimated that the viability tests required by the Missouri statute challenged in Webster could add \$125-200 to the cost of an abortion.³⁵

Government-funded reproductive health services further limit poor women's choices. Under the regulations now on the books, Title X programs, which are funded by the federal government to provide contraceptive counseling and services, cannot perform abortions, counsel women about abortion, or provide referrals for abortions.³⁶ Also, programs must keep their Title X programs completely separate from any abortion-related activity.³⁷ Although these regulations are being challenged in court³⁸ and some of them are currently enjoined, they provide one more threat to poor women seeking abortions. If the regulations are ultimately upheld by the courts, Title X programs will not even be able to tell a pregnant woman that abortion is an option or where she can obtain more information about abortion. Furthermore, the rules regarding keeping programs separate could force some programs to shut down entirely, further limiting reproductive choice.

Access Limitations

Poor women rely heavily on public hospitals for all their health care.³⁹ These facilities are not, however, meeting women's needs for reproductive health care. In 1985, only 17% of public hospitals reported performing abortions.⁴⁰ This dismal situation will only worsen if states follow Missouri's lead and pass restrictive laws such as those upheld in Webster. Under the Missouri law no "public facility" may assist or perform abortions unless the woman's life is in danger.⁴¹ "Public" is defined very broadly. As the dissent in Webster noted, the law bans abortions at the Truman Medical Center in Kansas City -- where, in 1985, 97% of all Missouri hospital abortions at 16 weeks gestation or later were performed -- even though the Center is a private hospital, staffed primarily by private doctors and administered by a private corporation.⁴² The Center is defined as "public" only because it is located on land leased from the city government.

The repercussions of Webster-like laws go beyond limitations on access. Such bans on abortions at "public" facilities would mean that few physicians and nurses will be trained in abortion techniques, because most training is done in hospitals, not clinics.⁴³ If the broadly-defined "public" hospitals thus prohibited from providing abortions⁴⁴ were to be added to the Catholic hospitals that already choose not to perform abortions,⁴⁵ doctors seeking abortion training would have few places to turn. The ultimate losers, however, would be women seeking affordable, quality reproductive health care.

Limitations on access to hospital abortions compromise women's health. Some women seeking abortion may not require an abortion to save their lives, but may have a high-risk medical condition which mandates that an abortion be carried out in a hospital setting.⁴⁶ Although most abortions can be safely performed on an out-patient basis, hospital facilities must remain available for women in special circumstances and for late-term abortions.

Anti-choice groups seek to limit abortions performed in clinics and doctors' offices as well. In the 1989-90 term, the Supreme Court agreed to review an Illinois case⁴⁷ challenging extensive abortion regulations. Among its many requirements, Illinois's complex licensing scheme required that abortions be performed in hospitals, or out-patient clinics licensed as Ambulatory Surgical Treatment Centers (ASTCs); that ASTCs meet exacting physical standards and be equipped with certain medical equipment; and that anyone seeking to open an ASTC get a certificate of need from the Department of Public Health after a public hearing and a 120-day review period. These regulations required ASTCs to be the "functional equivalent of small hospitals."⁴⁸ The requirements would add 10% or more to the cost of an abortion, force some clinics to close down, and prevent others from ever opening.⁴⁹ Before the Supreme Court could issue a ruling, the State of Illinois agreed in a settlement to withdraw the challenged regulatory scheme.⁵⁰ It is possible that other states might attempt to impose similar restrictions. Obviously, the ramifications for cost and access would be devastating.

Particular Problems

Even without these added restrictions, certain segments of the population face intensified difficulties in obtaining access to abortion. For rural women, locating a facility that will perform abortions is a major problem. In 82% of the counties in the United States (home to 30% of all women of reproductive age) there are no abortion providers.⁵¹ Hardest hit are rural women -- 79% of them live in counties with no abortion providers.⁵² This is a particularly severe aspect of an overall rural health

care problem. A car, necessary to reach most health care facilities, especially reproductive health care facilities, is beyond the means of many of the rural poor.⁵³ Even a routine health care visit requires a substantial investment of time and resources.

Native American women also face both funding and access problems. No Indian Health Service clinic or hospital may perform abortions, even when the woman is able to pay for it herself.⁵⁴ For Native American women who live on reservations, Indian Health Service facilities are usually the only health care provider within hundreds of miles.⁵⁵ Thus, a Native American woman seeking an abortion must have enough money to cover both the cost of an abortion and the cost of traveling a great distance to an abortion provider.

Although women in the more disadvantaged segments of our society face the most severe obstacles, access and funding problems have broader impact. Women above the poverty level also have difficulty paying for abortions. Many women who work part-time or in small companies, service industries, or temporary jobs do not have health insurance.⁵⁶ Even women who have insurance may not have adequate coverage when it comes to reproductive health care. Some states have passed laws prohibiting state employees' health insurance from covering abortions except in cases where the woman's life is in danger.⁵⁷ Other states have passed laws which mandate that private insurance policies may cover abortion only if an added premium is paid.⁵⁸ In the absence of state laws, many insurance companies decide on their own not to offer coverage for abortions.

Conclusions

America's health care crisis deals a heavy blow to poor and rural women and women of color. The effect on these women's reproductive health care is even more devastating. Very few insurance systems, public or private, cover abortions. Women, uninsured or inadequately insured, are on their own when it comes to paying for reproductive health care. Moreover, the cost of that health care is unnecessarily increased when women must travel great distances to reach providers. In the wake of the Supreme Court decision in the Webster case, these problems may intensify. If laws further limiting access to abortion and adding to the cost of the procedure are passed and upheld, they will increase the burdens on women. Such laws would produce more late term abortions, increase the health risks women face, and limit reproductive choice. For some women, safe abortions would no longer be an option. American women deserve better. They deserve adequate health care and full reproductive choice regardless of their ability to pay.

NOTES

1. McBarnette, Women and Poverty: The Effects on Reproductive Status, in Women, Health and Poverty 55, 57 (C. Perales & L. Young eds. 1988).
2. Among developed nations, America has the highest percentage of its population whose medical needs go unmet. In other developed nations almost no one is uninsured. Bill of Health: Medical Insurance Laws, New Republic, July 3, 1989, at 5.
3. Gold, The Struggle to Make Do Without Health Insurance, N.Y. Times, July 30, 1989, at 1.

DISCUSSION AND SUPPORTING FACTS

Governmental exclusion of abortion services from an otherwise comprehensive funding program (including costs related to childbirth) is not a "neutral" stance; it coerces women to make one choice by foreclosing the possibility of making another.

— Medicaid funds all other necessary health care related to pregnancy and reproductive health.

We should not have one Constitution for those of means and another for the poor. Women's constitutional right to choose abortion should not depend on the ability to pay. Yet in 37 states poor women cannot receive Medicaid funds for a medically necessary abortion.

— Thirty states and the District of Columbia prohibit Medicaid funding for abortion unless the abortion is necessary to save the life of the pregnant woman.¹

— Only 13 states permit the use of state funds for abortions that are "medically necessary," a term which generally includes the broadest range of situations for which a state will fund abortion.²

— In addition to the 13 states that fund medically necessary abortions, only 7 states provide funding for abortions in cases in which the pregnancy resulted from rape or incest or the fetus exhibits grave abnormalities.³

Prohibitions on public funding endanger poor women's health by forcing some to resort to life-threatening illegal abortions and others to delay abortions until later in pregnancy when the medical risks are higher. They also hurt impoverished families and children by forcing Medicaid-eligible women to pay for their abortions with money they need for living expenses, including food and clothing for their children.

— In states that restrict Medicaid funds for abortion, an estimated 2000 Medicaid-eligible pregnant women turned to illegal abortion in the initial 2-1/2 year period during which the Hyde Amendment was in effect.⁴

— Although the risks of legal abortion never exceed the risks of childbirth,⁵ after the first eight weeks of pregnancy, the risk of major complications from

abortion increases about 15 to 30% for each week of delay.⁶

— Medicaid-eligible women who were unable to obtain funds were delayed in obtaining abortions and had the procedure 2-3 weeks later than other women. An estimated 22% of the Medicaid-eligible women who had second-trimester abortions would have had first-trimester abortions if the lack of public funds had not resulted in delay.⁷ In the United States, the average cost of a legal abortion at ten weeks of pregnancy in a non-hospital setting is \$238.⁸ The median state maximum Aid to Families with Dependent Children (AFDC) monthly payment for a family of three is only \$354.⁹

— Almost fifty percent of women who obtained abortions after 16 weeks of pregnancy attribute their delay to difficulties in raising the money needed.¹⁰

Women who are attempting to regain control over their lives after having suffered the trauma of becoming pregnant as a result of rape or incest should not be forced to carry the pregnancy to term because they cannot afford to pay for abortion services.

— In 1989 Congress voted to restore the availability of Medicaid funds for abortions in cases of rape or incest, but President Bush vetoed the bill. He also vetoed a bill that would have allowed the people of Washington, D.C. to use their own tax dollars to pay for the abortions of poor women who were the victims of rape or incest.

— Because of Bush's veto, a 12-year-old girl who had been repeatedly raped by an adult cousin and beaten by her uncle was almost unable to have an abortion because she had no money to pay for the procedure. Only a last-minute private donation saved this 12-year-old from having to bear a child.¹¹

Prohibitions on public funding disproportionately harm women of color because a disproportionate number of poor people are women of color.

— In 1988, 31.6 % of African Americans, 26.8 % of Hispanics and 10.1 % of whites lived at or below the poverty level.¹²

— The abortion rate among women of color is about twice that of white women.¹¹

The current law prohibiting the use of federal funds for abortion services discriminates, not only against the poor, but against the 44 million women whose health care programs are subject to federal control, including federal employees who earn and pay for federal insurance benefits.

— The women who are affected by this discrimination include federal employees and their dependents, military personnel and their dependents, women in federal prisons, Native American women and Peace Corps volunteers.

— The Reproductive Health Equity Act (RHEA) is legislation that would restore full federal funding for abortion services for the 44 million women whose health care is controlled or provided by the federal government. RHEA was introduced in the 101st Session of Congress by Rep. Bill Green (R-NY) and Rep. Vic Fazio (D-CA).

Some opponents of public funding for abortion argue that tax dollars should not be used for abortions because many taxpayers believe abortion is morally wrong. Government expenditures cannot be based solely on the personal beliefs or objections of some taxpayers; the taxes of most citizens are used for some purposes they believe are inappropriate or even immoral.

— Pacifists conscientiously object to defense funding, environmentalists to energy sources that cause pollution, and some religious groups to conventional medical treatment or education. Federal funding for these activities has not been and will not be eliminated because of the beliefs held by some of the citizens whose taxes will be used to pay for them.

Notes

1. National Abortion Rights Action League, *Who Decides: A State-by-State Review of Abortion Rights in America* (Washington, D.C.: June 1989): iv. (The states are AL, AZ, AK, CO, DE, DC, FL, GA, IL, IN, KS, KY, LA, ME, MI, MS, MO, MT, NE, NV, NH, NM, ND, OH, OK, RI, SC, SD, TN, TX, UT.)
2. *Id.* (The states are AK, CA, CT, HI, MA, MD, NC, NJ, NY, OR, VT, WA and WV. Maryland, in practice, funds abortion in most cases, although its statute does not appear on its face to fund "medically necessary" abortions.)
3. *Id.* (The states are ID, IA, MN, PA, VA, WI and WY.)
4. Willard Cates, Jr., "The Hyde Amendment in Action," *Journal of the American Medical Association*, vol. 246 (1981): 1111.
5. Christopher Tietze and Stanley Henshaw, *Induced Abortion: A World Review 1986*, 6th ed. (New York: Alan Guttmacher Institute, 1986): 110.
6. Willard Cates, Jr. and David A. Grimes, "Mortality and Morbidity of Abortion in the United States," *Abortion and Sterilization*, ed. Jane Hodgson (New York: Grune and Stratton, Inc., 1981): 158.
7. Stanley Henshaw and Lynn Wallisch, "The Medicaid Cutoff and Abortion Services for the Poor," *Family Planning Perspectives*, vol. 16 (New York: Alan Guttmacher Institute, July/Aug. 1984): 170; "Abortion in the United States," *Facts in Brief* (New York: Alan Guttmacher Institute, 1989).
8. Stanley Henshaw, Jacqueline Forrest and Jennifer Van Vort, "Abortion Services in the United States, 1984-1985," *Family Planning Perspectives*, vol. 19 (New York: Alan Guttmacher Institute, Mar./Apr. 1987): 69.
9. Children's Defense Fund, *A Children's Defense Budget FY 1989* (Washington, D.C.: 1988): 93.
10. Aida Torres and Jacqueline Forrest, "Why Do Women Have Abortions?" *Family Planning Perspectives*, vol. 20 (New York: Alan Guttmacher Institute, July/Aug. 1988): 169.
11. Benjamin Weiser, "Reality Meets Philosophy in D.C. Girl's Abortion Case," *Washington Post*, Dec. 17, 1984, p. A26.

GOVERNMENTAL RESTRICTIONS ON THE REASONS WOMEN CAN HAVE LEGAL ABORTIONS

DISCUSSION AND SUPPORTING FACTS

Americans differ in their personal feelings about the morality of the different situations in which women choose to have abortions, but they realize that the fundamental question is who decides: the woman herself or politicians? Americans understand that it must be the woman who makes this highly personal decision, and that being pro-choice is not the same as being pro-abortion.

— 53 percent of Americans polled agreed with the statement "Abortion is a private issue between a woman, her family and her doctor. The government should not be involved."¹

— 68 percent agreed with the statement "Even in cases where I might think abortion is the wrong thing to do, I don't think the government has any business preventing a woman from having an abortion."²

— When asked, "If a woman wants to have an abortion, and her doctor agrees to it, should she be allowed to have an abortion, or not?" 63 percent responded that yes, she should.³

— 74 percent agreed with the statement "I personally feel abortion is morally wrong, but I also feel that whether or not to have an abortion is a decision that has to be made by every woman for herself."⁴

Attempts to outlaw abortions for sex selection or what is misleadingly labeled "birth control" are only anti-choice smokescreens to disguise the true goal of opponents of choice: to deprive all women of the right to decide whether or not to have an abortion. These proposals are a crude public relations ploy to trivialize the personal and serious reasons women choose to have abortions.

— The decision whether or not to have an abortion involves deeply personal questions of values, religion, and conscience, and an intensely personal evaluation of a woman's overall life situation and responsibilities. For most women, the decision to have an abortion cannot be reduced to a single, simply stated reason, but reflects the complex realities of their lives.⁵

— The ability to make their own decisions concerning abortion is of such critical importance to women

that prior to *Roe v. Wade*, experts estimate that over one million women each year risked their lives and health having illegal abortions to end crisis pregnancies.⁶

— The term "abortion for birth control" is being used in a deceptive and misleading manner by opponents of choice to describe legislation that actually seeks to overturn *Roe v. Wade* and criminalize abortion, including abortions resulting from contraceptive failure. These bills are aimed at taking from women the right to choose and giving the decision to politicians.

— The Alabama legislature is currently considering the first bill of this kind.⁷ The bill has nothing to do with birth control. It would outlaw all abortions, with narrow exceptions provided in cases of rape, incest, life endangerment, or when the fetus suffers from birth defects so severe that it would not survive. Opponents of choice hailed the introduction of this bill as the first of many that will ban "abortion as birth control."⁸

— There is no evidence that abortions for reasons of sex selection in the U.S. are anything more than extremely rare and isolated occurrences.

— Legislative proposals to criminalize abortion for virtually nonexistent reasons — such as for sex selection — are ploys designed to open the door to governmental usurpation of women's fundamental right to weigh for themselves the moral and personal reasons behind this decision.

The "birth control" label is used to give the false impression that because abortion is legal, women act irresponsibly and use abortion as an alternative to using contraception. In fact, the majority of women who choose abortion do so not as their primary means of birth control, but because their primary means of birth control failed.

— The majority of women who obtain abortions were using a contraceptive method during the month in which they became pregnant.⁹

— Fewer than 10% of women obtaining abortions say they have not used contraceptives, and of these, the vast majority are young unmarried women.

particularly teens, who may only recently have begun having sexual relations.¹⁰

— During the first year that a couple uses a diaphragm or condoms as their method of birth control, about one woman in seven will nevertheless become pregnant; even among couples who use the Pill — the most reliable birth control method short of sterilization — one in sixteen women will become pregnant.

The rate of unintended pregnancies likely to occur during the first year of use of the following birth control methods is:¹¹

oral contraceptives	6.2 pregnancies/100 couples
condoms	14.2 pregnancies/100 couples
diaphragm	15.6 pregnancies/100 couples
the "rhythm" method	16.2 pregnancies/100 couples
spermicides	26.3 pregnancies/100 couples

— The birth control methods with the lowest rates of unintended pregnancies are either irreversible, like sterilization, or have the highest risks of injury and disease, and may therefore be medically inappropriate for many couples.¹² For many women, preexisting health conditions may increase the risk or difficulty of using some contraceptive methods.

Once any reason for having an abortion is deemed unacceptable — including a reason such as sex selection that rarely, if ever, is a woman's actual reason — all women could be forced to publicly justify their reasons for seeking an abortion. As in the days of hospital screening committees and illegal abortions, a woman could be subjected to a humiliating official inquisition into the most intimate details of her life to prove that her reasons satisfy the governmental criteria. Consultation would be replaced by cross-examination.¹³

— Prior to 1973, many states required any woman who wanted to have an abortion first to go through an arduous and demeaning process of testifying before and gaining the approval of a screening committee. If such approval were necessary today, anti-choice groups could be expected to try to pack the screening committees with doctors who would deny all requests.

— Any restriction — regardless of its scope — could cause all women to suffer this gross invasion of privacy. Whether the restriction involves a general ban on abortion with narrow exceptions (such as rape, incest, life and health), or it involves a reason that rarely, if ever, is a woman's actual reason (such as sex selection), any such "reasons" restriction could cause every woman to have to publicly reveal, support and defend her most intimate reasons for choosing to have an abortion.

— In California, prior to *Roe*, a married woman who became pregnant after having been raped was denied an abortion and forced to carry the pregnancy to term even though the law technically allowed abortions in the case of rape, because she could not prove that the pregnancy was caused by the rapist and not her husband.¹⁴

Notes

1. Hickman-Maslin Poll, Sept. 1989.
2. CBS/NYT Poll, Aug. 1989.
3. CBS/NYT Poll, July 1989.
4. George Skelton, "Most Americans Consider Abortion Immoral," *Los Angeles Times*, Mar. 19, 1989, p. 12.
5. Aida Torres and Jacqueline Forrest, "Why Do Women Have Abortions?" *Family Planning Perspectives*, vol. 20 (New York: Alan Guttmacher Institute, 1988): 169.
6. Richard Schwarz, *Septic Abortion* (Philadelphia: Lippincott, 1968): 7; Willard Cates & Roger Rochat, "Illegal Abortions in the United States: 1972-1974," *Family Planning Perspectives*, vol. 8 (New York: Alan Guttmacher Institute, 1976): 2.
7. H.R. 51, Ala. Leg., Reg. Sess. (1990).
8. Mark Mayfield, "Alabama May Ban Birth Control Abortions," *USA Today*, Dec. 14, 1989, p. A3.
9. Stanley Henshaw and Jane Silverman, "The Characteristics and Prior Contraceptive Use of U.S. Abortion Patients," *Family Planning Perspectives*, vol. 20 (New York: Alan Guttmacher Institute, 1988): 158, 165.

10. Henshaw and Silverman, "The Characteristics and Prior Contraceptive Use of U.S. Abortion Patients," pp 1n5-66.

11. Elise Jones and Jacqueline Forrest, "Contraceptive Failure in the United States. (Revised Estimates from the 1982 National Survey of Family Growth)," *Family Planning Perspectives*, vol. 21 (New York: Alan Guttmacher Institute, 1989): 109.

12. Howard Ory, M.D., Jacqueline Forrest and Richard Lincoln, *Making Choices: Evaluating the Health Risks and Benefits of Birth Control Methods*, (New York: Alan Guttmacher Institute, 1983).

13. Gene B. Sperling and Walter Dellinger, "Anti-Abortionists' Semantic Scam," *New York Times*, Feb. 7, 1990, p. A25.

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FACT SHEET

What Is Abortion?

Definition

Abortion is the expulsion (forcing out) of a fetus before it is mature enough to live on its own. Legal induced abortion, the subject of this fact sheet, is abortion that is brought about deliberately by a medical procedure.

Methods

Physicians¹ use two methods to induce abortions. The first, most common method is to open (widen) the cervix and remove the contents of the uterus (primarily the fetus and placenta). The other method, used primarily toward the end of the second trimester, is to induce labor, so that the fetus and placenta are expelled as in childbirth.



Most abortions (91%) are performed during the first 3 months of pregnancy, when abortion is an exceptionally safe procedure.

Determination of Stage of Pregnancy

Before an abortion is performed, it is important to establish that the woman is indeed pregnant and if so, to measure as accurately as possible how far along her pregnancy is. Since it is difficult to pinpoint the exact moment the woman conceived, health professionals usually refer to a pregnancy in terms of the time that has passed since her last menstrual period (abbreviated as LMP). The woman is given a pregnancy test then examined internally (pelvic exam). She may also be examined by ultrasound, a painless use of sound waves (not x-ray) to "see" the inside of the uterus.

First-Trimester Pregnancy

If less than 13 weeks have passed since her last menstrual period, the woman is considered to be in the first trimester. The following gives an idea of the actual size of a fetus toward the end of the first trimester.

Actual size of fetus at 11 weeks LMP



On average, an 11-week fetus is about 2 inches (measured crown to rump) and weighs around 1/2 ounce.

Technique for Early Abortion

The standard method for abortion between 7-13 weeks is *vacuum aspiration* or *suction curettage*. This method is safely performed on an out-patient basis in a doctor's office or clinic.

The woman lies on an examining table with her feet in stirrups. The doctor inserts a closed speculum into the vagina, then opens it to hold the vaginal walls apart. Usually s/he then numbs the cervix with a local anesthetic. Occasionally there are medical or psychological reasons to put the woman to sleep briefly with a general anesthetic. Most abortions, however, can be comfortably and more safely performed with a local anesthetic.

Dilation. The physician gradually widens (dilates) the cervix in one of two ways. One way is to insert and remove narrow, tapered rods, one at a time, gradually increasing the size of the rod until the opening is about the diameter of a drinking straw (up to 1/2 inch). Another method is to insert a sterile laminaria (seaweed) rod, which absorbs moisture from the cervix and gradually expands, thus enlarging the opening.

Aspiration and Curettage. The physician inserts a small tube (cannula) which is attached to an aspirator machine (similar to the one dentists use to clear the mouth of saliva). The machine's suction empties the contents of the uterus through the tube. Then the doctor carefully checks the walls of the uterus with a spoon-shaped instrument (curette) to be sure no tissue remains.

The entire procedure takes about 10 minutes. Some women experience pain — especially menstrual-type cramping — during and for up to an hour after the procedure. In addition, the procedure is usually followed by vaginal bleeding.

Techniques for Midtrimester Abortion

Only one tenth of abortions in the U.S. are performed in the second trimester of pregnancy. Most of these are performed using the dilatation and evacuation (D&E) method, usually on an out-patient basis but sometimes in the hospital. Others are achieved by inducing labor (induction), and are nearly always done in the hospital. Ending the pregnancy is more difficult in mid-trimester because the fetus is larger.

D&E Method. The D&E procedure requires considerable skill of the physician but is basically an expansion of the vacuum aspiration method described earlier. The cervix is anesthetized, then dilated. Depending on the method used for dilation, it may take a few minutes, several hours, or overnight.

To perform the abortion, the physician uses suction as in first-trimester procedures, but also uses forceps to remove the fetal parts that are too large to pass through the suction tube. Finally, s/he checks the walls of the uterus with a curette. The procedure itself takes from 10 to 30 minutes. Because the procedure can be temporarily painful, the woman may be given pain medication to help her feel more comfortable.

Induction or Instillation Method. Less than 3% of all abortions in the U.S. are obtained by the induction method. The physician may administer a local anesthetic before passing a needle through the abdomen into the uterus. S/he withdraws some amniotic fluid through the needle and injects a medication (prostaglandin, urea, saline solution, or a combination) to induce contractions. Some hours later, the patient goes into labor to expel the fetus.

Complications from Abortion

Abortion is now one of the safest surgical procedures available. Major problems resulting from abortion are rare. For details, see *Fact Sheet: Safety of Abortion*.

Follow-up Care

Following an abortion, regardless of the method used, the woman is monitored for a period of time to see that her blood pressure and heart rate are stable and that bleeding and discomfort are within normal limits.

Before she leaves, the medical personnel may give her a prescription for antibiotic and/or other medications. They should also give instructions for post-operative care, including a 24-hour number for her to call in an emergency, and an appointment to return within 2-4 weeks. This follow-up visit is very important to make sure the abortion is complete and to discover and treat any problems that may have developed.

**Most abortions in the U.S. are performed by medical doctors. In Vermont, certified physician's assistants may also perform first-trimester procedures.*

For More Information

For information or referrals to qualified abortion providers, call the National Abortion Federation's toll-free Consumer Hotline, (800) 772-9100.

For Further Reading

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Information in this fact sheet is based on research by the U.S. Centers for Disease Control Abortion Surveillance Branch, The Alan Guttmacher Institute, and other members of the National Abortion Federation.

National Abortion Federation
900 Pennsylvania Avenue, S.E.
Washington, D.C. 20003
(202) 546-6080

Arvi Thompson Cook, Writer

February 1988

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FACT SHEET

Women Who Have Abortions

Most women who have abortions are young, unmarried, and less than ten weeks pregnant.

Number Having Abortions

Each year in the United States, women end approximately one out of four pregnancies, for a total of nearly 1.6 million abortions (1985). Both the number of abortions and the rate (per thousand women) have remained relatively constant throughout the 1980s.

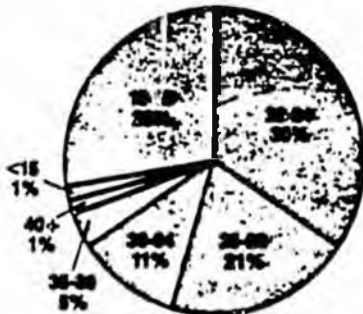
Age

More than 60% of women who have abortions are younger than 25.

- The highest rates occur among older teenagers and young adults (61 per thousand women ages 18-19; 51 per thousand women ages 20-24).
- The lowest rates occur among women younger than 15 (9 per thousand) and women after their mid-thirties (10 per thousand, ages 35-39; 3 per thousand, ages 40 and older).

Teenaged women end 42% of their pregnancies with abortion (not counting pregnancies that end in miscarriage or stillbirth); women over 40 end 51% of their pregnancies.

Percentage of all abortions by age (1983).



Marital Status

Most women who have abortions (81%) are not married at the time of the abortion; 96% of teenagers who have abortions are unmarried.

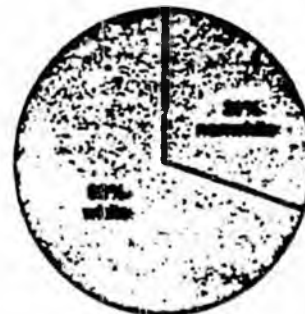
Percentage of all abortions by marital status (1983).



Race

In the U.S., nearly 70% of the women who obtain abortions are white.

Percentage of all abortions by race* (1983).



*Information is not available to distinguish the diverse groups categorized as "nonwhite."

Nonwhite women, however, have higher pregnancy rates (per thousand) as well as higher rates of both childbirth and abortion.

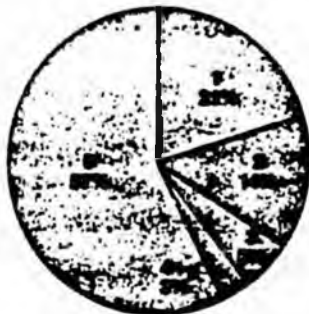
The Alan Guttmacher Institute has identified significant differences in the usual circumstances of abortion:

- White women tend to use abortion to postpone the beginning of childbearing;
- Nonwhite women tend to use abortion to space their children or to end their childbearing.

Previous Live Births

More than half of the women having abortions (57%) have not yet borne a child; about one third (35%) have either one or two children.

Percentage of all abortions by number of previous live births (1983).



Previous Abortions

Most women who have abortions (81%) have not had one before. The proportion of women who have had at least one prior abortion (39% in 1983) has gradually increased over the last several years, largely because women in their reproductive years have spent more of those years during a period that abortion was available and legal nationwide.

Percentage of all abortions by number of previous abortions (1983).

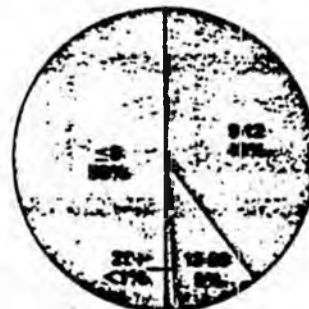


Stage of Pregnancy

Most women (90%) obtain abortions in the first trimester of pregnancy (12 weeks or less since the last menstrual period).

- Fully half of abortions are obtained within the first 8 weeks.
- Fewer than 1% of abortions occur after 20 weeks, and almost all of these are at 21-23 weeks.

Percentage of all abortions by weeks since last menstrual period.



Women's Reasons for Obtaining Abortions

Notwithstanding statistical trends of age, race, and marital status, the reasons women give for having abortions are as individual as the women themselves. Many did not intend to get pregnant. They speak of not being ready to be parents, being too young or too old, having too little money, feeling that another baby would make it harder to raise the children that have already been born, needing to finish school, not having supportive companions. Some women wanted to get pregnant but developed serious medical problems, learned that the fetus had severe abnormalities, or experienced some other life crisis (see *NAF Fact Sheet: Abortion After Twelve Weeks*).

The decision is rarely simple. Most women think long and hard about their options and then make the best choice they can under their own, personal circumstances.

Statistics for this Fact Sheet were derived from research by the U.S. Centers for Disease Control Abortion Surveillance Unit and by the Alan Guttmacher Institute.

For More Information

For information or referrals to qualified abortion providers, call the National Abortion Federation's toll-free Consumer Hotline, (800)772-9100. Weekdays 9:30-5:30 Eastern Time. In Washington, D.C., call 546-9060.

For Further Reading

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National Abortion Federation
900 Pennsylvania Avenue, S.E.
Washington, D.C. 20005
(202) 546-9060

Ann Thompson Cook, Writer

February 1988

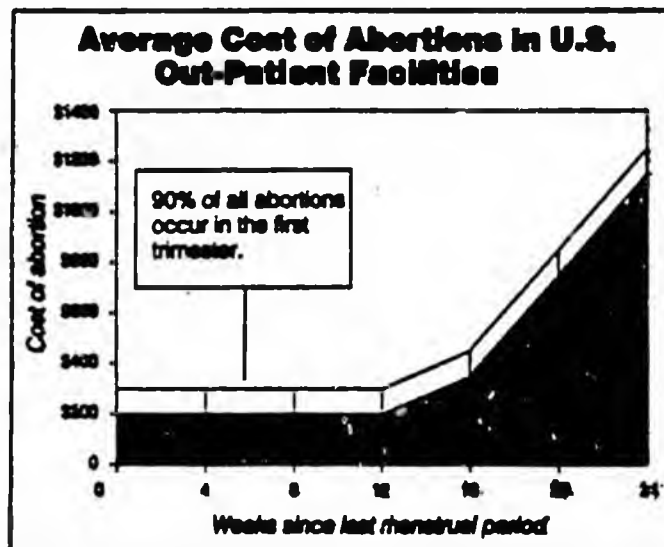
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FACT SHEET

Economics of Abortion

Abortion is a relatively inexpensive surgical procedure. Ninety percent of abortions in this country are performed in out-patient settings during the first trimester (twelve weeks) of pregnancy, at an average cost of \$200-300.

Nevertheless, many low-income families cannot obtain abortion services. Even though they are eligible for Medicaid for other kinds of medical care (including maternity), they are not covered for abortion services in most states.



Fees Remain Low Since Legalization of Abortion

Before abortion became legal, women often paid exorbitant sums to obtain an abortion, even from unlicensed, untrained practitioners working in non-sterile conditions. Because women so often had dangerous complications following these illegal abortions, they frequently required hospitalization, thus increasing their financial and health costs.

Since 1973, however, when abortion became legal throughout the U.S., it also became safer and considerably less expensive.

The cost to any particular person depends on many factors: how far along her pregnancy is; whether care is available in her own community; the kind of procedure and anesthetic that is used; the kind of facility she attends (clinic, physician's office, or hospital).

As mentioned, first-trimester, out-patient abortions generally cost between \$200-300. Second-trimester abortions, which are somewhat more complicated, cost about \$350-450 from the 13th to the 16th week; after the 16th week, the cost goes up about \$100/week (See figure).

Between 1983-1986, the average cost of abortion rose only 7 percent, compared to the cost of general medical care, which rose 21 percent.

Medicaid Funding Unavailable in Most States

The federal government and all states' permit Medicaid funds to be used for abortion in cases where the woman's life would be endangered by continuing her pregnancy. Fewer than half of the states pay for abortions for women who became pregnant by rape or incest and/or who have identified that the fetus has severe defects.

Only 13 pay for abortions in all or most circumstances (for details, see Figure 2).

Thus, in most parts of the U.S., low-income women who choose to end an unwanted pregnancy are denied coverage. This fact has serious consequences for families as well as taxpayers.

Denying Medicaid Funding for Abortion Costs Both Taxpayers and Families

The cost to individual families is inestimable. Approximately three quarters of the women who are denied Medicaid funding for abortion have one anyway, usually at great sacrifice to themselves and their families—working extra hours or

jobs or borrowing from their rent or grocery budgets. Sometimes, because it takes time to scrape up the money, the woman has to obtain the abortion at a later stage, when the procedure is even more expensive and poses more risk to her health.

Those who oppose public funding for abortion call it an unfair burden on taxpayers. In fact, the cost to the taxpayer of *denying* funding to low-income families who choose abortion is even greater. When a baby is born to Medicaid-eligible families, the average government expenditure is \$6,750 (compared to the average cost of abortion, \$200-300):

- \$2,200 for maternity care,
- \$1,770 for pediatric care during the first two years, and
- \$1,890 for the child's share of financial and nutritional support.

This average government expenditure per birth—\$6,750—counts only the expenses of the pregnancy through the first two years of the child's life.

Families also pay a high price whenever a woman must carry a pregnancy to term because she is unable to pay for abortion services. She is much more likely to experience complications in childbirth, infant mortality, and/or the myriad problems inherent in adding another child that the family cannot afford or welcome.

¹Except Arizona, which has no Medicaid program

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For More Information

For information or referrals to qualified abortion providers, call the National Abortion Federation's toll-free Consumer Hotline (800) 772-9100. In Washington, DC: 546-9080. Weekdays 9:30-5:30 Eastern Time.

National Abortion Federation
900 Pennsylvania Avenue, S.E.
Washington, DC 20003
(202) 546-9080

Ann Thompson Cook, Writer
March 1988
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Circumstances in Which Medicaid Funds Abortion, by State

State	Pregnancy Endangers Woman's Life	Pregnancy Resulted from Rape or Incest	Fetus Has Serious Defects	All or Most Circumstances
Alabama	✓			
Alaska	✓	✓	✓	✓
Arizona	No Medicaid Program			
Arkansas	✓			
California ¹	✓	✓	✓	✓
Colorado	✓		✓	
Connecticut ¹	✓	✓	✓	✓
Delaware	✓			
Dist. of Columbia	✓			
Florida	✓			
Georgia	✓			
Hawaii	✓	✓	✓	✓
Idaho	✓			
Illinois	✓			
Indiana	✓			
Iowa	✓	✓	✓	
Kansas	✓			
Kentucky	✓			
Louisiana	✓			
Maine	✓			
Maryland	✓	✓	✓	✓
Massachusetts ¹	✓	✓	✓	✓
Michigan	✓			
Minnesota	✓	✓		
Mississippi	✓			
Missouri	✓			
Montana	✓			
Nebraska	✓			
Nevada	✓			
New Hampshire	✓			
New Jersey ¹	✓	✓	✓	✓
New Mexico	✓			
New York	✓	✓	✓	✓
North Carolina	✓	✓	✓	✓
North Dakota	✓			
Ohio	✓			
Oklahoma	✓			
Oregon	✓	✓	✓	✓
Pennsylvania	✓	✓		
Rhode Island	✓			
South Carolina	✓			
South Dakota	✓			
Tennessee	✓			
Texas	✓			
Utah	✓			
Vermont ¹	✓	✓	✓	✓
Virginia	✓	✓	✓	✓
Washington	✓	✓	✓	✓
West Virginia	✓	✓	✓	✓
Wisconsin	✓	✓		
Wyoming	✓	✓		

¹paying pursuant to court order

This information is accurate as of February 1988. Please contact the National Abortion Federation at (202) 546-9080 for the most up-to-date information. Source: *The Alan Guttmacher Institute, The American Civil Liberties Union Reproductive Freedom Project.*

FACT SHEET

Public Support for Abortion

Opinion Surveys Reveal Strong Public Support

Three quarters of American voters believe that, "Since nobody knows for certain when life begins, people should follow their own moral convictions and religious teachings on the abortion issue" (Hickman, 74%).

Most Americans say that a woman should have the right to choose abortion:

- During the first 3 months of pregnancy in consultation with her doctor (Figure 1).
- When being pregnant is threatening her life (Gallup¹; 94%).
- When her pregnancy resulted from rape or incest (NORC, 77%; Gallup¹, 85%).
- When her baby is likely to be deformed (NORC, 76%; Gallup¹, 60%).
- When her health is threatened (NORC, 86%; Gallup, 84%).
- When she is an unmarried teen whose future might be seriously affected (Harris, 54%).

Most people oppose amending the Constitution to ban abortion (Harris², 62%, Hickman, 63%, CBS³, 69%).

Americans are convinced that if abortion were illegal again, "a lot of women will get hurt and killed from bad doctors doing secret abortions" (Hickman, 77%).

Americans' life experiences do affect their attitudes toward abortion. According to the National Opinion Research Center (NORC), attitudes toward abortion differ significantly among various groups of Americans.

Personal Experience with Abortion: At least 18 million women living today have had an abortion. They—and people who know them well—tend to be more supportive of abortion than are people who have had no direct experience with abortion.

Education: People who have more than a high school education are much more likely to approve legal abortion than those who have not completed high school.

Religion: Catholics and Protestants tend to have similar views on abortion; their support for abortion is consistent with that of the general public. In general, however, Americans who say they are not very strongly affiliated with their religious group approve of abortion much more than do people who report a strong religious affiliation.

Majority Says Government Should Not Be Involved in Decision

These differences notwithstanding, support for abortion is broad based. Seventy-seven percent of American voters believe that "Abortion is a private issue between

Figure 1

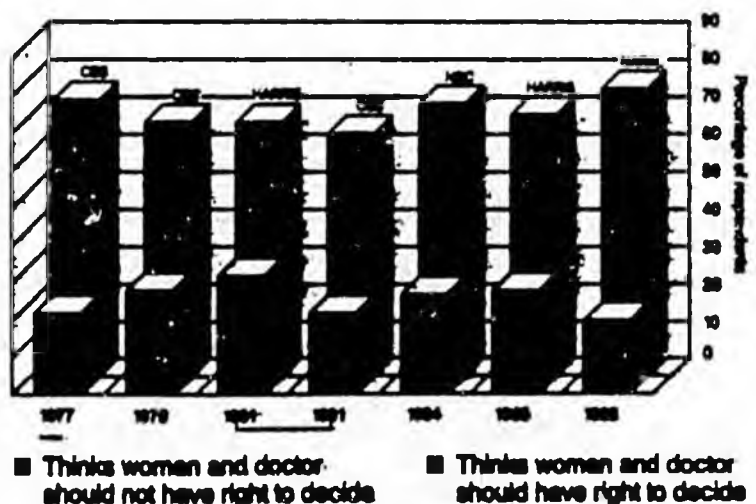
U.S. Public Strongly Supports Privacy in Abortion Decisions

CBS News/New York Times Survey, "The right of a woman to have an abortion should be left entirely to the woman and her doctor" (1977, 1979) "If a woman wants to have an abortion and her doctor agrees to it, should she be allowed to have an abortion, or not?" (1981)

Harris Survey: "Tell me if you agree or disagree. Any woman who is three months or less pregnant should have the right to decide, with her doctor's advice, whether or not she wants to have an abortion." (1981, 1983)

NBC News Exit Poll: "Do you agree or disagree...: the decision to have an abortion should be left to the woman and her physician?" (1984)

NARAL Study, Hickman-Maslin Research and American viewpoint, "Abortion is a private issue between a woman, her family, and her doctor." (1985)



a woman, her family, and her doctor (and that) the government should not be involved" (Hickman). This support for privacy and non-interference includes people who identify themselves as:

- Conservatives (70%),
- Catholics (81%),
- Southerners (72%),
- Republican voters in the 1988 Presidential election (69%), and
- Persons who believe in the Bible as the literal word of God (67%).

Many View Abortion as the Best Solution to a Wrong Situation

Abortion is a complex and emotionally charged issue for many people. For example, half of Americans believe that abortion is wrong (NBC, 54%). Yet an even greater number—including those who believe abortion is wrong—believe that it is sometimes "the best thing in a bad situation" (CBS², 66%).

Attitudes Unswayed by New Knowledge About Fetal Development

Most Americans say that new scientific information about the early stages of development either has not changed their views or has made them favor abortion more (Gallup², 76%).

A Caution About Opinion Surveys

When people respond to public opinion surveys, they may appear to give different answers depending on (1) the way questions are worded, (2) the context in which they are asked, and (3) the type of answers offered.

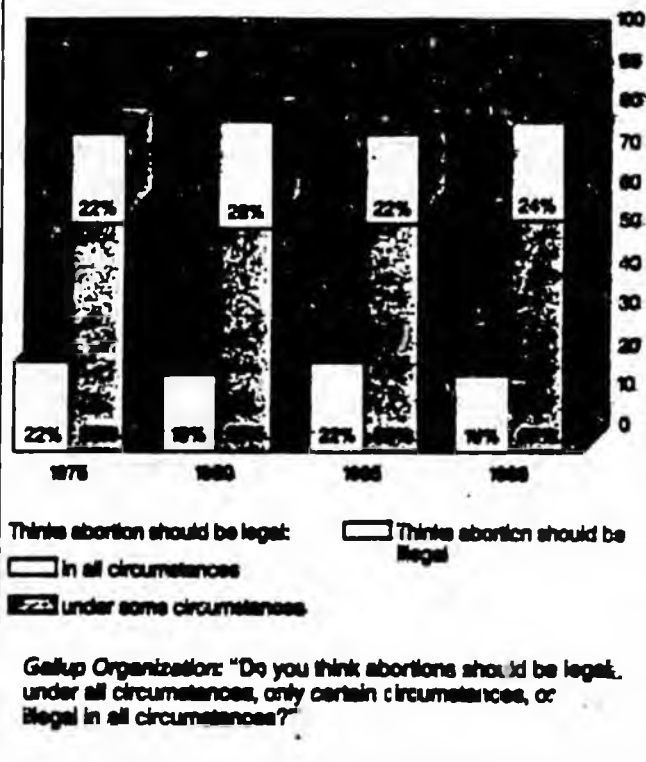
Compare, for example, Figures 1 and 2. When people are given choices that include a middle ground—such as always/sometimes/never—their answers may appear more cautious than when they must decide one way or another—such as agree/disagree.

The Nature of the Debate

Antiabortion activists frequently claim that the Supreme Court's decision in *Roe v. Wade* created public support for abortion. To the contrary, public support grew during the debate that began in the mid-1960s, and the Supreme Court decision in 1973 simply validated that change (Luker). In fact, public support has remained relatively constant over the last several years (Figure 1).

Indeed, the polls over the last several years suggest that Americans are no longer debating whether abortion should be legal or illegal. If there is a debate, it seems to focus on whether abortion should be restricted to certain circumstances or left entirely as a personal decision in the hands of women and their physicians.

Figure 2
Public Supports Legal Abortion in Most Situations



Surveys Cited in This Fact Sheet

NORC, National Opinion Research Center, General Social Survey 1988.

Gallup¹ Organization, September 25–October 1, 1988.

Gallup² Organization Survey for *Newsweek* Magazine, December 27–28, 1988.

Louis Harris¹ and Associates, January 24–27, 1985.

Louis Harris² and Associates, July 17–22, 1987.

Hickman–Maitin Research and American Viewpoint for NARAL, December 13–17, 1988.

CBS¹/*New York Times*, May 11–14, 1987.

CBS²/*New York Times*, August 16–22, 1987.

CBS³/*New York Times*, 1985.

NBC/*Wall Street Journal*, January 14–17, 1988.

For More Information

For information or referrals to qualified abortion providers, call the National Abortion Federation's toll-free hotline: (800) 772-9100. In Washington, DC, 546-9060. Weekdays, 8:30–5:30, Eastern Time.

For Further Reading

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National Abortion Federation
900 Pennsylvania Avenue, S.E.
Washington, DC 20008
(202) 546-9060
March 1988

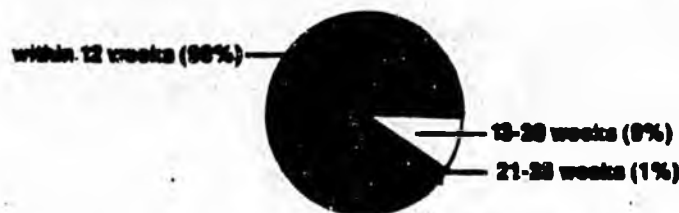
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FACT SHEET

Abortion after Twelve Weeks

Most women who obtain abortions realize they are pregnant, decide to end their pregnancy, and do so within the first 12 weeks of pregnancy. Ideally, all abortions would be performed at 7 or 8 weeks of pregnancy when the procedure is safest. Nevertheless, women have compelling reasons to obtain abortions in later weeks. This fact sheet describes those reasons.

Abortions by stage of pregnancy



Only 10% of abortions are obtained after 12 weeks, fewer than 1% after 28 weeks. Abortions are rarely performed after the 28th week. In practice, women have access to abortion in the third trimester only when their life is in danger.

Teens at Special Risk

Nearly half of all abortions after 12 weeks are obtained by teenagers. One factor in their delay is not realizing for several weeks that they are pregnant.

- They may understand so little about their bodies that they don't recognize signs of pregnancy.
- They may become pregnant before they have begun to menstruate or before their menstrual periods are regular, so they don't have the signal of a missed period.
- They may — like many teenagers who do not understand reproduction — believe a variety of myths, such as "You can't get pregnant the first time."
- They may have been raped or sexually abused and kept that a secret, denying the possibility of pregnancy.

When they do realize they are pregnant, they may panic: "My parents will never forgive me! What shall I do? Maybe it isn't true. Maybe it will go away." Or they may spend several weeks wishing and hoping

that "everything will work out for the best." Usually, of course, the pregnancy doesn't go away, and the realities of having a child gradually become evident.

Another factor in teenagers' delay is that few are experienced in using the health care system, and comprehensive health care and decision counseling are not yet widely available to young people.

Even further delays are introduced by states that require abortion providers to notify or obtain consent of minors' parents before proceeding with an abortion. Most teenagers do tell some caring adult (a parent, relative, or family friend). But those teenagers who feel they must protect their privacy — because a parent is abusive, for example — are left with two choices. They must either:

- petition the court and convince a judge that they are competent to make this decision; or
- find services in a state without such restrictions, raise extra money, and travel to an out-of-state facility.

Either choice creates delays that can easily push the abortion past the first trimester.

These examples barely hint at the complex events in teenagers' lives that impede their getting prompt medical attention. Some, but probably not all, of teenagers' delays could be prevented by

- providing comprehensive sex education;
- providing accessible, sensitive family planning services including contraception; and
- repealing restrictive parental notification and consent laws.

Undiagnosed Pregnancy

Some women do not recognize until well into their pregnancy that they are pregnant. In addition to the previous examples of teenagers, these are

- women who do not menstruate at all or who menstruate only a few times a year due to illness, medication, or strenuous athletic activity;
- women who believe their absent periods reflect the onset of menopause;
- women with normally light periods who mistake spotting of early pregnancy for menstruation;

- women who believe they cannot become pregnant because they are nursing babies or undergoing medical treatments;
- women whose pregnancies are initially — sometimes repeatedly — misdiagnosed by physicians or other clinicians.

Lack of Money

Many women in this country can barely afford shelter, food, and clothing for their families, much less medical care. Some are eligible for Medicaid funding for other medical services, but for several years, the federal government and most states have prohibited the use of Medicaid funds to pay for abortions. For a woman who has no money to spare, gathering a few hundred dollars can take weeks and thus delay her abortion.

Tragic Events

A pregnancy may have been planned, very much wanted — until a tragedy strikes. Perhaps the woman's husband or partner has a heart attack or becomes seriously ill. Her small child is hit by a car and paralyzed. She loses her job. A parent has a stroke. Women in such situations may decide this is the wrong time to have a baby and choose abortion, even when the pregnancy has advanced past the first trimester.

Medical Complications

Like the rest of the population, pregnant women are susceptible to cancer, heart disease, severe depression, addictions, and other significant health problems. A woman may choose abortion because continuing her pregnancy would make her condition worse or actually threaten her life, or because she requires — or has been given erroneously — x-rays or medications that cause defects in developing fetuses.

Freedom to Choose Abortion

Clearly, some abortions after 12 weeks could be avoided with more comprehensive education, wider access to contraception and abortion, full Medicaid funding, and repeal of laws restricting minors' access to abortion. It is also clear that some abortions after 12 weeks are unavoidable. Only the woman who is pregnant can determine what is the best solution, and every woman must be free to make that choice.

Severe Defects in Fetus

When a woman learns from the results of a sonogram or amniocentesis that, for example, her fetus is anencephalic (has virtually no head), has a severe chemical disorder affecting its metabolism, or has no working kidneys, she may wish to end the pregnancy rather than carry it through the remaining months, only to have the infant die — or in other cases, to bear an infant with severe disabilities. Unfortunately, amniocentesis results are generally not available until the 18th or 19th week of pregnancy and thus delay the abortion decision.

Abortion after 12 Weeks is Legal.

The U.S. Supreme Court declared that in the first trimester of pregnancy (the first 12 weeks), the abortion decision must be left entirely to the woman and her physician. The court allowed states to regulate the abortion during the second trimester, but for only one purpose — to protect the woman's health. In the third trimester, states may regulate or forbid abortion *unless* the woman's life or health is endangered (*Roe v. Wade*, 1973).

For More Information

For information or referrals to qualified abortion providers, call the National Abortion Federation's toll-free Consumer Hotline: (800) 772-9160 or in Washington, D.C. 546-9080, weekdays 9:30-5:30 Eastern Time.

For Further Reading

B. Benderly, *Thinking About Abortion*. Dial Press, 1984.

Parental Notice Laws: Their Catastrophic Impact on Teenagers' Right to Abortion, American Civil Liberties Union Reproductive Freedom Project, 1986.

C. Tietze & S. K. Henenaw, *Induced Abortion: A World Review*, The Alan Guttmacher Institute, 1988.

D. A. Grimes, "Second-Trimester Abortions in the United States," *Family Planning Perspectives*, 16:260, 1984.

Other NAF Publications

Consumer's Guide to Abortion Services/Guia sobre servicios de aborto

Fact Sheets: What is Abortion? Safety of Abortion, Economics of Abortion, Women Who Have Abortions, Public Support for Abortion
Fourteen Years of Legal Abortion: Benefits to the Nation's Health

National Abortion Federation
900 Pennsylvania Avenue, S.E.
Washington, DC 20003
(202) 546-9080

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Ann Thompson Cook, Writer

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