

HB

37

(7)
Date Referred to Committee: February 18, 1997

FURTHER REFERRALS:

Finance

Date of Committee Action: 3/7/97

The JUDICIARY Committee considered:

HB 37

HOUSE BILL NO. 37

PARENTAL CONSENT BEFORE MINOR'S ABORTION

"An Act relating to a requirement that a parent, guardian, or custodian consent before certain minors receive an abortion; establishing a judicial bypass procedure by which a minor may petition a court for authorization to consent to an abortion without consent of a parent, guardian, or custodian; amending the definition of 'abortion'; and amending Rules 40 and 79, Alaska Rules of Civil Procedure; Rules 204, 210, 212, 213, 508, and 512.5, Alaska Rules of Appellate Procedure; and Rule 9, Alaska Administrative Rules."

recommends it be replaced with the following committee substitute CS HB 37 (JUD) the same title a new title

additional referral to _____ Committee
 attached amendment(s)

ADOPTS: _____ Letter of Intent

ATTACHES NEW FISCAL NOTE(S): (Dept)

APPROVES PREVIOUS: (Dept/Date)

fiscal note(s) _____

2 fiscal note(s) ADMIN. (OPA), and COURT

zero fiscal note(s) _____

3 zero fiscal note(s) HSS (PUB. HEALTH), H. (LEG. ASST.), ADMIN (PUB. DEF.)

SIGNING WITH RECOMMENDATIONS		NO	DNP	NR	AM
	CROFT		✓		
	ROKEBERG			✓	
	PORTER				
	GREEN	✓			
	JAMES	✓			
	BUNDE			✓	
	BERKOWITZ		✓		

CHAIR'S SIGNATURE



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name
 committee on HB 37, dated March 5, 1997
 bill/subject

I strongly urge the House Judiciary Committee to support HB 37. Mature wisdom and judgement is lacking in minors in making such a decision that will have lasting physical, emotional and psychological effects on the minor. Minors are sometimes unable to make fully informed choices. This kind of a choice needs to be discussed with a parent who can grant some wisdom + maturity to such a decision. Minors sometimes only respond out of emotions - not thought out judgements. Parents have the right to know. Please support HB 37.

Thank you.

Stephanie Vieira

Signed: *Stephanie A Vieira*
 Testifier

Unborn children
 Representing (Optional)

611 Birch St
 Address

7473698
 Phone No.



ALASKA STATE LEGISLATURE

PLEASE ENTER INTO THE RECORD MY TESTIMONY TO THE Judiciary (JUD)
 COMMITTEE ON (S)HB NO 37 (STA) DATED 3/5/97
COMMITTEE NAME
BILL/SUBJECT

I support HB 37 and thank you for this opportunity to express my opinion and for your work on this bill.

HB 37 Does not address the question of a child wanting to carry her pregnancy to term when parents want her to have an abortion, but it is not inconsistent with Alaska's right to privacy. It establishes parental authority on the same level required for other medical procedures.

I have been employed as an RN in a hospital setting, and could not find the fact that someone under 18 years of age would be able to obtain an abortion without parental consent and yet no other procedure. It is logically inconsistent.

Our court system/law of the land must reflect our moral culture... Hopefully not anti family.

SIGNED Ann Langworthy - Ann Langworthy
 TESTIFIER

Self
 REPRESENTING (OPTIONAL)
1789 A. Baltimore Tr Fbks AK 99712
 ADDRESS/PHONE NUMBER 907-457-2271



ALASKA STATE LEGISLATURE

PLEASE ENTER INTO THE RECORD MY TESTIMONY TO THE Judiciary
 COMMITTEE ON HB 37 DATED March 5, 1997
 BILL/SUBJECT COMMITTEE NAME

I urge support of HB 37. As a parent I am deeply concerned that my responsibility to help my children make responsible decisions can be undermined by an industry that discourages children from turning to their parents in a crisis. HB 37 does not legislate family communication. Those who oppose this bill are accurate in this respect. However, it provides a safeguard for the young maturing woman whose actions have already proven (by the fact that she chose to submit to circumstances that led to the pregnancy) she needs more mature counsel & time to consider her action. Abortion does not end the problem for the minor. It will affect her for the rest of her life. Wisdom dictates that a person seeks counsel from people who care for her.

This bill does not criminalize abortion. It protects parents' rights & responsibilities.

SIGNED Anna Scheller
 TESTIFIER

REPRESENTING (OPTIONAL)
3283 Jefferson Dr, Fbk's AK 99709 (907) 455-4401
 ADDRESS/PHONE NUMBER



STATE OF ALASKA

LEGISLATIVE AFFAIRS AGENCY

DIVISION OF PUBLIC SERVICES

Jan Persson

Legislative
Information Office

P.O. Box 845

Tok, AK 99780

Phone (907) 883-5020

Fax (907) 883-5021

DATE: 3-4-97

Please accept the enclosed original(s) of written testimony
for the HJUD (HB 37) teleconference hearing that was
scheduled on 3-4-97.

A copy of this testimony was transmitted to your committee via
fax on 3-4-97.

Thank you,

Jan Persson

I do agree with the intent of the bill if it is to reduce the number of teenage pregnancies & all abortions in the state of Alaska. Not requiring consent, I believe, takes away my rights as a parent to counsel my daughter about our cultural & religious beliefs about abortion. The welfare of our children is not being taken into consideration when we would leave a post-abortion child on her own, without support. They will be experiencing feelings of loss grief & confusion to the point of depression & suicide. The judicial consent bypass must be a stricter process. It frightens me that girls would be able to get this paperwork so easily, because we are afraid to make it difficult for them to get this life altering procedure. It should be a process that takes work. If they are mature, responsible people a little work to submit papers to prove their understanding of all the risks involved.

This bill is a step toward reducing the number of abortions in Alaska. However, we cannot stop here if we are going to protect the future of our children.



Alaska State Legislature

Please enter into the record my testimony to the Judiciary
 committee on House Bill 32 dated March 5, 1997.
 committee on Parental Consent - Abortion
 bill/subject

I support legislation requiring parental consent when a minor is seeking abortion.

The legislation should include a requirement to inform the parties involved of alternatives to abortion and give them the names of agencies available to offer support during the pregnancy

Signed: Paul M. Seger
 Testifier

Representing (Optional)

307 Islander Drive Sitka, Ak 99835

Address

907 - 747 - 5185

Phone No.

Alaska State Legislature

Please enter into the record my testimony to the House Judiciary on H.B. 37, an Act relating o Parental Consent Before a Minor Receives an Abortion dated Wed, March 5, from 1-4pm.

I support H.B. 37 because a minor does not have enough mature judgment to make this important decision. I also question the motives of anyone who would influence a minor to have an abortion with-out first consulting with their parents. It is a sad but true fact that women are some times abused before, during, and after the procedure. This abuse is most often committed on minors receiving abortions with out parental consent, because the abortionist know that a minor receiving an abortion would be afraid to complain to their parents or any other authority

Who in a minors life would be with her daily to watch for problems stemming from the abortion if her parents have no idea one has been performed? Remember there are often problems that need medical attention that she might not recognize as such.

The minor therefor is like a potted ~~plant~~ ^{plant in which a plant}...totally at the mercy of the abortionist. She ^{has been growing up raised, used, given or thrown out to rot} unable to speak up for herself then or later.

Please vote for H.B. 37. Thank You.

Signed Virginia C. Phillips

Testifier J

Representing(Optional) Write - 4 - Life, NATY Right TO LIFE, Speakers

404 Lake St., 2-D SITKA, AK 99975

Address

907-747-8024

Phone Number

Alaska State Legislature

Please enter into the record my testimony to the House State of Affairs Committee on HB 37. "Parental Consent before a minor receives an abortion with a judicial by pass option. dated February 11, 1997.

In every case that I worked with, I have seen family bonds strengthened when a minor told her parents she was pregnant. Most parents love and care for their children and any thing that weakens the bond between parents and child destroys the family bonds of trust. It is inconceivable to me why any one who is not receiving money or personal satisfaction from weaking the bonds between parent and child, would want to help a minor sneak behind her parents back and have such an intrusive surgical procedure as an abortion. Remember it is the parents who are the ones who are left with their child's emotional and physical problems after an abortion. One such problem is increased risk of breast cancer in women who terminated their first pregnancy with an abortion. Studies at the Fred Hutchinsons' Cancer Center have verified this sad fact.

Please pass HB 37. Thank You.

Signed Virginia C. Phillips T
Testifier

Self
Representing(Optional)

404 LAKE ST. 2-D SITKA, AK 99835
Address

907-747-8024
Phone Number



Alaska State Legislature

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

committee on 2-11-97 ^{on} _{dated} HB 37

I am strongly against HB 37,
regarding parental consent for minor abortions.

I believe you are putting the health of
~~the~~ young women in jeopardy. I know a
girl who, upon finding she was pregnant,
smoke, drank and starved herself to the
point of aborting because her parents are
fundamentalists & she believed, would have
kicked her out of the house.

Signe

Sincerely,

JULIE MARQUARDT

Box 6071, Sitka 99835

712 Monastery Street
Sitka, Alaska 99835
March 5, 1997

The Twentieth Alaska State Legislature
Judiciary Committee

Re: HB 37(STA)

Dear Sirs:

I support HB 37(STA). I feel it is wise for our state's laws to require parental consent before minors may receive an abortion.

In school we were taught that our United States has many levels of government: federal, state, municipal, church, family, and the individual. Each level of government has its defined realm of jurisdiction. If however, some of its authority is usurped by another level, then its ability to govern is to that measure diminished.

Traditionally, American parents have been responsible for the well being, training, and guidance of their children. It is only when the children are no longer minors that the children become responsible for governing their own affairs as responsible, law-abiding citizens. The traditional family unit provides needed guidance and protection for the minor child until he or she becomes mature enough to make wise decisions.

If a higher level of government, in this case our state, whether intentionally or unintentionally, undermines parental authority, by allowing a minor to act independently of her parent's consent; then that government diminishes the family unit's ability to govern it's members effectively. It contributes to the family unit's disfunction.

Can we afford to weaken our families? Can we afford to have such a basic building block to the foundation of our social structure become dysfunctional? No, we cannot.

I believe it is essential to the survival of our country for every level of government to preserve the family. I also believe it is in the best interest of every child to insure that their parents will always have a voice in their minors choices and actions. Therefore, it is necessary for the State of Alaska to require parental consent before a minor can legally receive an abortion.

Thank you for your consideration in this matter.

Sincerely,

Yvonne Anderson



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary committee name
 committee on ~~HB 37~~ ~~and HB 37~~ , dated 3-5-97
 bill/subject

It is wrong to bypass the rightful place of the family in allowing minors to obtain abortions without parental knowledge and consent. Abortion rights have been so politicized that we are ignoring commonsense.

Who will be responsible for the child in the case of complications following an abortion? A woman was recently medivacked from Sitka with life-threatening problems following an abortion. If this woman were a minor whose parents had not given consent the parents would have every right to be outraged.

I support HB. 37

Signed: Matthew Johnson
 Testifier

Representing (Optional)
110 Finn Albee Sitka, Ak.
 Address
907 747 8368
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Judiciary Finance
committee name
 committee on HB 37, dated 3/5/97
bill/subject

I am opposed to House Bill 37 as even minors need to have access to abortion. Women of all ages need to have the right to make the decision to have or not have an abortion in order to have control over their own bodies.

Signed: Jennifer A. Mason
Testifier
Self and Sitkans For Choice
Representing (Optional)
1701 Halibut Point Rd. #5 Sitka, AK 99835
Address
(907) 747-4897
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HOUSE JUDICIARY COMMITTEE
committee name

committee on HB-37/PARENTAL CONSENT FOR, dated 03-05-97
bill/subject ABORTION OF MINORS

YOUNG WOMEN NEED EMOTIONAL SUPPORT WHEN MAKING THIS DECISION. WHETHER IT IS AN ABORTION DONE IN THE 1ST, 2ND, OR 3RD TRIMESTER (OR IF THE MINOR SHOULD DECIDE TO KEEP THE CHILD) IT IS IMPERATIVE THAT SHE HAVE A STRONG PARENTAL OPPORTUNITY FOR GUIDANCE IN THIS AREA. THIS HAS NOTHING TO DO WITH "REPRODUCTIVE RIGHTS" NOR "THE RIGHT TO PRIVACY". IT IS GOOD PRACTICE TO ALLOW PARENTS TO HAVE A SAY IN THIS SURGICAL PROCEDURE FOR THEIR YOUNG FEMALE FAMILY MEMBERS

PLEASE SUPPORT HB-37 AND SECURE PARENTAL ~~RIGHTS~~ ^{INVOLVEMENT} REGARDING ~~THE~~ ABORTION FOR THEIR MINOR CHILDREN -

Signed: Jerese Judy
Testifier

Representing (Optional)

P.O. BOX 2975 SITKA AK 99835

Address

907-966-2204

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HOUSE JUDICIARY
committee name

committee on PARENTAL CONSENT HB37, dated MARCH 5, 1997
bill/subject

Please do all you can to require parental consent before a minor can have an abortion. The decision to have an abortion is very complex and can have long-lasting ramifications; a minor is not mature enough to make that type of decision on her own. She needs the benefit of as much counsel as she can get so as not to make a permanent solution to a temporary problem.

Finally, from the parents' perspective, as they are responsible for their children in all other regards, including paying restitution for damages their child may have caused, they should be permitted to have input on this life and death situation. Parental consent is required for a child to play in sports and to travel for school activities, etc., so should also be required for a minor to have an abortion.

Thank you.

Signed: Mary J. McHally
Testifier

Self

Representing (Optional)
608 Sawmill Creek Rd, Sitka

Address
747-3877

Phone No.

ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the House Judiciary Committee on HB37, an act relating to parental consent before a minor receives an abortion, dated March 5, 1997.

I support HB37, which would require parental consent before a minor obtains an abortion. I consider that a decision as important as whether to seek an abortion one with such serious and long term impact not only on the young woman but also on close family members and the father of the child that it deserves serious consideration and discussion among those most intimately involved.

Even dispensing of headache medication at the local high school requires parental permission! Will not an abortion have more far-reaching effects than a headache?

Please support HB37, helping insure that parents of teens accept their parental role and responsibility and that teens understand that an abortion rates right up there with headaches!

Signed:

Dolores Farrell

Testifier

Representing (Optional)

3501 Halibut Pt. Hwy. Sitka, AK 99835
Address

(907) 747-6718
Phone Number



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name .
 committee on HB 37 , dated March 5, '97 .
 bill/subject

As a parent, I don't see how I can be legally responsible for my child if a major procedure can be done without my consent, sometimes without knowledge. There is no way a parent can be expected to be able to provide the counsel or medical follow-up that is usually required. Parental consent is vital!

Signed: Martha Lou Braun
 Testifier

Representing (Optional)
1913 Cascade Cle Rd ; Sitka, AK
 Address
747-3688
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary Committee
 committee name
 committee on HB 37, dated March 4, 1997.

This nation ^{bill/subject} was founded on freedom and equality for all her citizens. How foolish it seems that we now hold meetings to discuss the fate of the most innocent and purest of our citizens, the unborn. Their blood cries out against us, Hypocrites. The Bible speaks to us telling us to speak out for those who cannot speak for themselves. Our unborn have no voice, no rights, and no freedom. We must speak for them or we forfeit our own rights to speak for ourselves. When one group of citizens takes away the rights of others they will soon lose their own rights. Not since slavery has an issue faced this nation of this magnitude. We must see through ~~the~~ the hypocrisy. Once slavery was legal but it did not make it right. The courts have ruled that abortion is legal but again we error. It is time we turn back to our true constitutional rights. I oppose all abortion, and therefore I am against a bill that gives a minor the right to have an abortion without parental consent. Thank you for hearing this testimony and may God grant us his wisdom in this matter.

Signed: Kelly P. Lundy Kelly P. Lundy
 Testifier

Representing (Optional)

205 Vitskari Street Sitka, AK. 99835

Address

907 - 747 - 3746

Phone No.

FISCAL NOTE

No. 5

Bill Version: CSHB 37(STA)

(H) Publish Date: 2/19/97

STATE OF ALASKA
1997 LEGISLATIVE SESSION

Revision Date: 2/18/97
Title: "An Act relating to a requirement that a parent, guardian, or custodian consent before certain minors receive an abortion..."
Sponsor: REP. S KELLY, KOHRING, VEZEY AND MULDER
Requestor: _____

Department Affected: Administration
BRU: Office of Public Advocacy
Component: Office of Public Advocacy
COMPONENT SERIAL NO. 43

EXPENDITURES/REVENUES:

(Thousands of Dollars)

OPERATING EXPENDITURES	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	168.0	168.0	168.0	168.0	168.0	168.0
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	168.0	168.0	168.0	168.0	168.0	168.0

CAPITAL EXPENDITURES						
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CHANGE IN REVENUES ()						
------------------------	--	--	--	--	--	--

FUND SOURCE:

(Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	168.0	168.0	168.0	168.0	168.0	168.0
1005 GF/Program Receipts						
1037 GF/Mental Health						
OTHER						
TOTAL	168.0	168.0	168.0	168.0	168.0	168.0

Estimate of any current year (FY 97) cost: \$ 0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary.)

The judicial bypass provisions of this bill contemplate a hearing at which an unemancipated minor may seek the court approval of her wish to have an abortion. The bill mandates the appointment of counsel for the minor but does not identify which agency would provide these services. This fiscal note assumes that Office of Public Advocacy (OPA) would be appointed because that agency currently represents children in most other civil cases. The fiscal note is based on the following assumptions: (1) 2,400 abortions per year are performed in Alaska; (2) 12 percent of abortions per year (288) are performed on women aged 17 or younger; (3) 39 percent of young women (112) wishing to obtain an abortion would seek a judicial bypass, based on the fact that 61 percent of parents are informed of abortions in those states which do not require parental notice or consent.

(continued)

Prepared by: B. Cottina
Division: Rep. Committee on Women
Approved by Commissioner: Sandra Hutto
Agency: Tamara J. Hutto

Phone: 465-3743
Date: _____
Date: 2/18/97

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FISCAL NOTE

STATE OF ALASKA
1997 LEGISLATIVE SESSION

BILL NO. HB 37

ANALYSIS: (continued)

Thus, OPA could be expected to provide attorney representation to 11? young women each year in judicial proceedings in which the minor sought to obtain approval for an abortion. The legal representation in these cases would be short but intense. The Office of Public Advocacy estimates that such services would cost an estimated \$1,500 per case for a total of \$168.0 per year.

STATE OF ALASKA
1997 LEGISLATIVE SESSION

No. 3
Bill Version: CSHB 37(STA)
(H) Publish Date: 2/19/97

Revision Date: 2/18/97
Title: Relating to parental consent before certain minors receive an abortion
Sponsor: Rep.'s Kelly, Kohring, Vezey and Mulder
Requestor: _____

Dept. Affected: Health and Social Services
BRU: State Health Services
Component: Public Health Admin Services
COMPONENT SERIAL NO. 292
See also (SN#): _____

Expenditures/Revenues:

(Thousands of Dollars)

OPERATING	FY98	FY99	FY00	FY01	FY02	FY03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
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CHANGES IN REVENUES ()						
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FUND SOURCE

(Thousands of Dollars)

	FY98	FY99	FY00	FY01	FY02	FY03
1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (please specify)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

	FY98	FY99	FY00	FY01	FY02	FY03
FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of any current year (FY97) cost: \$0.0

ANALYSIS: (Attach a separate page if necessary)

This bill has no fiscal impact on the Division of Public Health. It will be necessary to develop a new system which will maintain the confidentiality of the patient and yet assure her the capability of accessing the system easily whether she be from Anchorage or Shaktoolik. There is presently no system in the small remote and rural communities that will assist a minor in meeting the requirements of parent/guardian/custodian consent and access to a judicial process. The legally responsible adult in many situations is often not the head of the child's household. Often the only adult with whom she has contact is the individual from whom the child hopes to keep the information confidential.

Prepared by: B. Cottina
Division: Rep. Colette James
Approved by Commissioner: Sealnette James
Agency: _____

Phone: 465-3743
Date: _____
Date: 2/18/97

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FISCAL NOTE

STATE OF ALASKA
1997 LEGISLATIVE SESSION

No. 2
Bill Version: CSHB 37(STA)
(H) Publish Date: 2/19/97

Bill Date: 2/18/97 Dept. Affected: Health and Social Services
Title: Relating to parental consent before BRU: Medical Assistance
certain minors receive an abortion Component: Medicaid Non-Facility
Sponsor: Rep.'s Kelly, Kohring, Vezey and Mulder COMPONENT SERIAL NO. 229
Requestor: _____ See also (SN#): _____

Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY98	FY99	FY00	FY01	FY02	FY03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES						
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CHANGES IN REVENUES ()						
-------------------------	--	--	--	--	--	--

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (please specify)						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of any current year (F:97) cost: \$0.0

ANALYSIS: (Attach a separate page if necessary)

Enactment of this legislation would have very little impact on the funding of abortions under the General Relief Medical Assistance and Medicaid Programs. Very few abortions funded by these programs are performed on minors.

Prepared by: B. Cottina Phone: 465-3743
Division: Rep. U. Cavallito James Date: _____
Approved by Commissioner: Franklin James Date: 2/18/97
Agency: _____

FISCAL NOTE

No. 1
 Bill Version: CSHB 37(STA)
 (H) Publish Date: 2/19/97

STATE OF ALASKA
1997 LEGISLATIVE SESSION

Revision Date: 2/18/97
 Title: "An Act relating to a requirement that a parent, guardian, or custodian consent before certain minors receive an abortion..."
 Sponsor: REP. S KELLY, KOHRING, VEZEY AND MULDER
 Requestor: _____

Department Affected: Administration
 BRU: Public Defender Agency
 Component: Public Defender Agency
 COMPONENT SERIAL NO. 1631

EXPENDITURES/REVENUES:

(Thousands of Dollars)

OPERATING EXPENDITURES	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0
CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
CHANGE IN REVENUES ()	0.0	0.0	0.0	0.0	0.0	0.0

FUND SOURCE:

(Thousands of Dollars)

002 Federal Receipts						
003 GF Match						
004 GF						
005 GF/Program Receipts						
037 GF/Mental Health						
OTHER						
TOTAL	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY 97) cost: \$ 0.0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary.)

The bill would require parental, guardian or custodian consent in writing before an abortion for an unmarried, pregnant unemancipated woman under 18 years of age. A judicial process is set up to bypass the consent requirement by the filing of a complaint in superior court. A lawyer shall be appointed to represent the complainant if she has not retained an attorney, but Section 5 of the bill provides those lawyers will be from the Office of Public Advocacy. Therefore, there will be no fiscal impact on the Public Defender Agency.

Prepared by: B. Cottrell
 Division: Rep. S Kelly, Kohring, Vezey and Mulder
 Approved by Commissioner: Joseph D. James
 Agency: _____

Phone: 465-3743
 Date: _____
 Date: 2/18/97

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STATE OF ALASKA
1997 LEGISLATIVE SESSION

Bill Version: CSHB 37(STA)

(H) Publish Date: 2/19/97

Revision Date: 2/18/97

Dept. Affected: Alaska Court System

Title: Parental consent before a minor's
abortion

BRU: Trial Courts

Component:

Sponsor: REP. S KELLY, KOHRING, VEZEY AND MULDER

Requestor: COMPONENT SERIAL NO. 768

Expenditures/Revenues

(Thousands of Dollars)

OPERATING EXPENDITURES	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES	10.0	10.0	10.0	10.0	10.0	10.0
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	10.0	10.0	10.0	10.0	10.0	10.0

CAPITAL EXPENDITURES						
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CHANGE IN REVENUES ()						
------------------------	--	--	--	--	--	--

Fund Source

(Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	10.0	10.0	10.0	10.0	10.0	10.0
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other						
TOTAL	10.0	10.0	10.0	10.0	10.0	10.0

Estimate of any current year (FY 97) cost: None

Positions

Full-Time						
Part-Time	1.0	1.0	1.0	1.0	1.0	1.0
Temporary						

ANALYSIS: (Attach a separate page if necessary)

See attached fiscal analysis.

Prepared by: B. Collins

Division: Rep. Kelly's office

Phone: 465-3743

Date:

Approved by Commissioner: Senator James J. Peltola

Agency:

Date: 2/18/97

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COMMITTEE COPY

ALASKA COURT SYSTEM
FISCAL ANALYSIS

— HB 37

HB 37 provides that a person may not knowingly perform an abortion upon a woman who is unmarried, under 18 years of age, and unemancipated, unless, before the abortion, one of the woman's parents or the woman's guardian or custodian has consented to the abortion in writing; a court issues an order authorizing the woman to consent to the abortion; or a court, by its inaction, constructively authorizes the woman to consent to the abortion. A woman who seeks a court order authorizing an abortion is required to have an attorney. If she cannot afford an attorney, one must be appointed by the court from the Office of Public Advocacy (OPA). Because we are dealing with unemancipated minors, it must be assumed that all attorneys will be paid for by the state. OPA has estimated that 112 minor females will seek judicial approval for an abortion each year.

HB 37 requires a superior court judge to hold a hearing in these cases on an expedited basis. This note assumes that the review of documents, the hearing, the decision process and the preparation of the order will average two hours of judicial time. This note also reflects clerical costs associated with processing 112 filings which involve expedited hearings and which require court clerks to actively follow cases to make certain that time limits are met and that constructive consent has been given in cases in which a court takes no action within the specified period. This note does not reflect costs for appeals in cases where a court denies permission for an abortion.

FISCAL NOTE

STATE OF ALASKA
1997 LEGISLATIVE SESSION

BILL NO. CSHB 37 (STA)

Revision Date: <u>02/24/97</u>	Dept. Affected: <u>Alaska Court System</u>
Title: <u>Parental consent before a minor's abortion</u>	BRU: <u>Trial Courts</u>
Sponsor: <u>Reps. Kelly, Kohring, Vezey, Mulder...</u>	Component: _____
Requestor: <u>House State Affairs</u>	COMPONENT SERIAL NO. <u>768</u>

Expenditures/Revenues (Thousands of Dollars)

OPERATING EXPENDITURES	FY 98	FY 99	FY 00	FY 01	FY 02	FY 03
PERSONAL SERVICES	10.0	10.0	10.0	10.0	10.0	10.0
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS & CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	10.0	10.0	10.0	10.0	10.0	10.0
CAPITAL EXPENDITURES						
CHANGE IN REVENUES ()						

Fund Source (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	10.0	10.0	10.0	10.0	10.0	10.0
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other						
TOTAL	10.0	10.0	10.0	10.0	10.0	10.0

Estimate of any current year (FY 97) cost: None

Positions

Full-Time						
Part-Time	1.0	1.0	1.0	1.0	1.0	1.0
Temporary						

ANALYSIS: (Attach a separate page if necessary)

See attached fiscal analysis.

Prepared by: <u>C. S. Christensen III, Staff Counsel</u>	Phone: <u>264-8228</u>
Agency: <u>Alaska Court System</u>	Date: <u>02/24/97</u>
Approved by: <u>Arthur H. Snowden, II, Administrative Director</u>	Date: <u>02/24/97</u>
Agency: <u>Alaska Court System</u>	

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ALASKA COURT SYSTEM
FISCAL ANALYSIS
CSHB 37 (STA)

CSHB 37 (STA) provides that a person may not knowingly perform an abortion upon a woman who is unmarried, under 18 years of age, and unemancipated, unless, before the abortion, one of the woman's parents or the woman's guardian or custodian has consented to the abortion in writing; a court issues an order authorizing the woman to consent to the abortion; or a court, by its inaction, constructively authorizes the woman to consent to the abortion. A woman who seeks a court order authorizing an abortion is required to have an attorney. If she cannot afford an attorney, one must be appointed by the court from the Office of Public Advocacy (OPA). Because we are dealing with unemancipated minors, it must be assumed that all attorneys will be paid for by the state. OPA has estimated that 112 minor females will seek judicial approval for an abortion each year.

CSHB 37 (STA) requires a superior court judge to hold a hearing in these cases on an expedited basis. This note assumes that the review of documents, the hearing, the decision process and the preparation of the order will average two hours of judicial time. This note also reflects clerical costs associated with processing 112 filings which involve expedited hearings and which require court clerks to actively follow cases to make certain that time limits are met and that constructive consent has been given in cases in which a court takes no action within the specified period. This note does not reflect costs for appeals in cases where a court denies permission for an abortion.

Alaska Court System

Fiscal Analysis

CSHB 37 (STA)

Personal Services

	<u>Salary</u>	<u>Benefits</u>	<u>Total</u>
Pro tem superior court judge, fully vested, Anchorage, PPT 224 hours	\$2,919	\$1,595	\$4,514
Clerical overtime for 224 hours for range 10A (see note below)			<u>5,473</u>
Total Personal Services			<u><u>\$9,987</u></u>

Note:

This bill will require clerical (range 8) and legal technician (range 12) services. The average range of the two levels is approximately range 10, which was used for estimating the clerical overtime costs of this legislation.



Alaska State Legislature

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

committee on #37 / STA, dated 3/5/97
bill/subject

Please oppose Bill No. 37. In this age of information we need to focus on educating our children rather than taking away their rights. If you are not going to make consensual sex between two teenagers an offense punishable by law, please do not impose a law on a teenage woman that would force her to bear the burden of an unplanned, unwanted pregnancy.

This would be forcing an invasive medical procedure (pregnancy & birth) against her will. (#37) This represents more gov. restrictions! Please oppose Bill No. 37

Signed: Lisa Kreber
Testifier

Representing (Optional)
801 Lincoln St. Sitka, AK 99835
Address
747-7547
Phone No.

**THE FOLLOWING PAGES MAY
NOT FILM LEGIBLY BECAUSE OF
THE POOR QUALITY OF THE ORIGINAL**



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name
 committee on #37/STA, dated 3/5/97
 bill/subject

Please oppose Bill no 37. If this bill passes
 our teenagers will be at even more risks
 than just teen pregnancies; parenthood.

Signed: Nicolette I. Brown
 Testifier

 Representing (Optional)

 Address

 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name
 committee on #37 / STA, dated 2/6/97
 bill/subject

Please oppose Bill #37. I have no doubt in my mind that the parents of my grandchildren could not hesitate to hit them (even shoot) with their children's pregnancy. This among many other reasons convinces me to think that they may have to tell their parents about being an abortion.

Signed: *Robyn Coleman*
 Testifier

Representing (Optional)
213 7th St, Sitka, AK 99833
 Address
907-747-5807
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name
 committee on #37/STA, dated 3/5/97
 bill/subject

Please oppose Bill no. 37!

Signed: *Gleth M. Casanova*
 Testifier

Representing (Optional)
2 Makinoff Sitka AK 99735

Address
9 - 747-3796

Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Judiciary
 committee name
 committee on #37 HB, dated 3/6/97
 bill/subject

Please oppose HB 37, Parental Consent for Minor Abortions.

I don't believe the government can mandate health / medical procedures, nor is it the government's role to mandate communication.

Please oppose HB 37.

Signed: Julie Macquardt
 Testifier

Representing (Optional)
Box 6071 Sitka, AK. 99835

Address
907) 747-2667
 Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary Committee
 committee name
 committee on HB 37/STA , dated 3/5/97
 bill/subject

Please oppose # 37/STA

*Thank you
Joseph*

Signed: *Joseph Thomas*
 Testifier *self*

Representing (Optional)
PO BOX 6433 Sitka AK 99835
 Address
907-966-2554
 Phone No.

MAR- 6-97 THU 1:14 PM DR W PALMER

FAX NO. 9075862595

P. 1

JOSEPH D. RIEDERER, M.D.
4800 NO. DOUGLAS
JUNEAU, ALASKA 99801
TELEPHONE 907 - 586-2900

March 6, 1997

Representative Joe Green
Legislature
State of Alaska
FAX#465-4316

RE: House Bill #65

Dear Representative Green:

I had hoped to testify on House Bill #65 but I will be out of Juneau at the next hearing. I was present on March 5.

My name is Joseph Riederer. I have been a Juneau physician since 1961. I am not a specialist in OB-GYN; however, a major part of my practice was obstetrics from 1961-77 and I attended perhaps 2000 deliveries, and from that time, have continued to do some C-section and laparoscopic OB and GYN care from 1977-96. I am writing in support of House Bill #65. I would have like to have testified against the use of partial birth abortion as a medical procedure. I believe it is unspeakably inhumane to carry this procedure out on what is frequently a viable infant.

This type of medical procedure, that is, a partial birth abortion, is not even listed or discussed or described as a medical procedure in any of the current OB-GYN references that I can find. For instance, the seven volume authoritative reference on Gynecology and Obstetrics by Sciarra, does not even discuss surgical intervention for late term abortions in this manner.

It has been argued that this is a necessary option for the health and safety of the mother. This is not verified by any respected medical authority that I can find. There are multiple procedural complications to the mother in any abortion procedure. That includes certainly uterine perforation, or rupture, sepsis, bleeding after the procedure, and incompetent cervix, sterility, and psychological trauma, etc. All of this is in addition to the fetal death. People certainly need to figure out before the 2nd or 3rd trimester if abortion is an option or not if you believe an abortion is a necessity.

The proposed definition of this Bill is specific and no other medical procedure

would be restricted or affected by banning partial birth abortion. The language is clear and specific.

I hope that House Bill #65 will be enacted. Thank you for this consideration.

Sincerely



Joseph D. Riederer, M.D.



Alaska State Legislature

Please enter into the record my testimony to the HOUSE JUDICIARY
committee name

committee on HOUSE BILL 37 , dated MARCH 6, 1997 .
bill/subject

PLEASE VOTE AGAINST H.B. 37.
GOVERNMENTAL MICROMANAGEMENT
CAN ONLY LEAD TO FURTHER BREAKDOWN
OF THE FAMILY UNIT.

WARD M. ELIDIDGE

Signed: Ward M. Elididge
Testifier

Representing (Optional)

PO BOX 6245, SITKA, AK 99835
Address

907-747-8278
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HOUSE JUDICIAL Comm.
 committee name
 committee on HB 37, dated 3/5/97
 bill/subject

*See attached
 Information you requested
 Concerning my verbal statement*

Signed: *Alvin Huston*
 Testifier

Representing (Optional)
213 Shotgun Alley
 Address
(907) 747-3931
 Phone No.

Laws that restrict access to abortion by requiring parental involvement increase teenage birth rates. For example, according to testimony in the reproductive freedom case *Hodgson v. Minnesota*, the Minneapolis birthrate rose 38.4% among mothers aged 15 to 17 after enforcement of a parental notification law. The birthrate for 18 to 19 year-old women, who were not affected by the law, rose only .3% during the same period.

Having little education, few skills and responsibility for a child they may not have wanted, teenage mothers and their children are seven times more likely to slide into poverty. According to national estimates, children born to teenage mothers in 1987 will receive more than \$5.5 billion in federal welfare payments over a 20-year period. And because children born to teenagers are often unwanted, those children may suffer severe psychological and educational disadvantages. As for the minors themselves, their entire adult lives are often limited, if not ruined, by government laws that effectively force them into motherhood.

From: ACLU Briefing Paper on Reproductive Freedom, The Rights of Minors.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
 committee name
 committee on HB 65 / Partial Birth dated March 5, 1997
 bill/subject Abortion

I am opposed to the passage of this bill - contrary to anti-choice propaganda, this is a procedure which occurs rarely with great agony to parents who want their child but become aware there is something terribly wrong with the fetus. This is an opportunistic way to further the anti-choice agenda.

Signed: Janette M. Rutherford
 Testifier

Representing (Optional)
301 Moller Ave Sitka
 Address
907 747-5379
 Phone No.



Alaska State Legislature

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

committee on Parental Consent before minors dated 3-5-97
bill/subject abortion

Signed: Corinne Eagle
Testifier

Representing (Optional)

909 HPR #39, Sitka

Address

(907) 747-3595

Phone No.

HB 37 would protect my parental rights. As a parent it is my right and duty to protect, care for, and nurture my child. The passing of HB 37 would ensure that these rights are safe guarded.

HB 37 would also protect minors from making uninformed decisions. The decision to have an abortion is a serious one, and should be researched fully before the procedure is performed. Most minors lack the maturity to make this decision on their own. HB 37 would be a shield to minors, protecting them from a potentially harmful procedure. A procedure that could leave emotional scars for the rest of their lives.

I have been in the position of a pregnant minor. It is a frightening and confusing time. During this time abortion crossed my mind as an alternative. Without my parents I would have chosen this route, not having even the faintest idea about the consequences of such an operation. I am eternally thankful that my parents had an opportunity to help me make the right decision. Every parent should have that opportunity.

I give my full support to HB 37. Passing the bill in is the best interests of families, parents, and children.



Alaska State Legislature

Please enter into the record my testimony to the Judiciary
committee name
committee on Partial-Birth abortion, dated 3-5-97
bill/subject

Signed: Don B Eagle
Testifier

Representing (Optional)

909 HPR #39, Sitka

Address

747-3595

Phone No.

I strongly support HB65. Partial-birth abortion is a shocking reversal of what is right and what is wrong. We are now being told that it is "wrong" to restrict in any way what a woman would do with "her" baby. We are told it is "right" to allow physicians to kill what would otherwise likely be a healthy baby. This is a travesty of justice. The blood of those undefended victims will be on all of our hands if we allow this institutional homicide to continue. We must immediately rid our state of this procedure and set an example for the rest of the country as a state that will actively protect and defend those who cannot defend themselves.

Consider the procedure itself. Word cannot adequately describe the horror of partial-birth abortion. Can those who support it really call it "good" and "necessary" without shuddering at the realities of the procedure, considering it a "necessary evil" in their hearts? Is evil really necessary? At one time, early-term abortions were shocking and then became more or less accepted. At this time, partial birth abortion is shocking; do we make it illegal, as it should be, or do we let it become more or less accepted? What then? Why not pull the baby all the way out before jabbing the scissors into its skull? Better yet, let there be a one month trial period after birth to decide if the baby will cause unresolvable difficulties. If there is a problem, let the baby be brought back before the month is over, and then it may be killed. We'll call it "post-birth abortion." Shocking? Not if we continue to close our eyes to this present horror, thereby allowing the continuing encroachment on the rights of our undefended child.

I support HB65 because it will end this horror in Alaska. There should be no basis in the law for partial-birth abortion. It is nothing short of murder. It is wrong. We Alaskans can take the lead in the Nation by ridding our state of this horror and making the clear statement that partial-birth abortion will never be acceptable.

CS FOR HOUSE BILL NO. 37(JUD)
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTIETH LEGISLATURE - FIRST SESSION

BY THE HOUSE JUDICIARY COMMITTEE

Offered:
Referred:

Sponsor(s): REPRESENTATIVES KELLY, KOHRING, VEZEY, AND MULDER, Ogan, Dyson,
Martin

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to a requirement that a parent, guardian, or custodian consent
2 before certain minors receive an abortion; establishing a judicial bypass procedure
3 by which a minor may petition a court for authorization to consent to an
4 abortion without consent of a parent, guardian, or custodian; amending the
5 definition of 'abortion'; and amending Rules 40 and 79, Alaska Rules of Civil
6 Procedure; Rules 204, 210, 212, 213, 508, and 512.5, Alaska Rules of Appellate
7 Procedure; and Rule 9, Alaska Administrative Rules."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. PURPOSE; FINDINGS. (a) It is the intent of the legislature in enacting this
10 Act to further the important and compelling state interests of
11 (1) protecting minors against their own immaturity;
12 (2) fostering the family structure and preserving it as a viable social unit;

1 (3) protecting the rights of parents to rear children who are members of their
2 household; and

3 (4) protecting the health of minor women.

4 (b) The legislature finds that

5 (1) immature minors often lack the ability to make fully informed choices that
6 take account of both immediate and long-range consequences;

7 (2) the physical, emotional, and psychological consequences of abortion are
8 serious and can be lasting particularly when the patient is immature;

9 (3) the capacity to become pregnant and the capacity for mature judgment
10 concerning the wisdom of an abortion are not necessarily related;

11 (4) parents ordinarily possess information essential to a physician's or
12 surgeon's best medical judgment concerning the child;

13 (5) parents who are aware that their minor daughter has had an abortion may
14 better ensure that the daughter receives adequate medical attention after the abortion;

15 (6) parental consultation is usually desirable and in the best interest of the
16 minor; and

17 (7) parental involvement legislation enacted in other states has shown to have
18 a significant effect in reducing abortion, birth, and pregnancy rates among minors.

19 * Sec. 2. AS 18.16.010(a) is amended to read:

20 (a) An abortion may not be performed in this state unless

21 (1) the abortion is performed by a physician or surgeon licensed by the
22 State Medical Board under AS 08.64.200;

23 (2) the abortion is performed in a hospital or other facility approved for
24 the purpose by the Department of Health and Social Services or a hospital operated by
25 the federal government or an agency of the federal government;

26 (3) before an abortion is knowingly performed or induced on an
27 unmarried, unemancipated woman under 18 years of age, consent has been given
28 as required under AS 18.16.020 or a court has authorized the minor to consent
29 to the abortion under AS 18.16.030 and the minor consents; for purposes of
30 enforcing this paragraph, there is a rebuttable presumption that a woman who
31 is unmarried and under 18 years of age is unemancipated [CONSENT HAS BEEN

1 RECEIVED FROM THE PARENT OR GUARDIAN OF AN UNMARRIED WOMAN
2 LESS THAN 18 YEARS OF AGE]; and

3 (4) the woman is domiciled or physically present in the state for 30
4 days before the abortion.

5 * Sec. 3. AS 18.16.010 is amended by adding new subsections to read:

6 (e) A person who performs or induces an abortion in violation of (a)(3) of this
7 section is civilly liable to the pregnant minor and the minor's parents, guardian, or cus-
8 todian for compensatory and punitive damages.

9 (f) It is an affirmative defense to a prosecution or claim for a violation of
10 (a)(3) of this section that the pregnant minor provided the person who performed or
11 induced the abortion with false, misleading, or incorrect information about the minor's
12 age, marital status, or emancipation, and the person who performed or induced the
13 abortion did not otherwise have reasonable cause to believe that the pregnant minor
14 was under 18 years of age, unmarried, or unemancipated.

15 (g) It is an affirmative defense to a prosecution or claim for violation of (a)(3)
16 of this section that compliance with the requirements of (a)(3) of this section was not
17 possible because an immediate threat of serious risk to the life or physical health of
18 the pregnant minor from the continuation of the pregnancy created a medical
19 emergency necessitating the immediate performance or inducement of an abortion. In
20 this subsection, "medical emergency" means a condition that, on the basis of the
21 physician's or surgeon's good faith clinical judgment, so complicates the medical
22 condition of a pregnant minor that

23 (1) an immediate abortion of the minor's pregnancy is necessary to
24 avert the minor's death; or

25 (2) a delay in providing an abortion will create serious risk of
26 substantial and irreversible impairment of a major bodily function of the pregnant
27 minor.

28 * Sec. 4. AS 18.16 is amended by adding new sections to read:

29 **Sec. 18.16.020. Consent required before minor's abortion.** A person may
30 not knowingly perform or induce an abortion upon a minor who is known to the
31 person to be pregnant, unmarried, under 18 years of age, and unemancipated unless,

1 before the abortion, at least one of the following applies:

2 (1) one of the minor's parents or the minor's guardian or custodian has
3 consented in writing to the performance or inducement of the abortion;

4 (2) a court issues an order under AS 18.16.030 authorizing the minor
5 to consent to the abortion without consent of a parent, guardian, or custodian, and the
6 minor consents to the abortion; or

7 (3) a court, by its inaction under AS 18.16.030, constructively has
8 authorized the minor to consent to the abortion without consent of a parent, guardian,
9 or custodian, and the minor consents to the abortion.

10 **Sec. 18.16.030. Judicial bypass for minor seeking an abortion.** (a) A
11 woman who is pregnant, unmarried, under 18 years of age, and unemancipated who
12 wishes to have an abortion without the consent of a parent, guardian, or custodian may
13 file a complaint in the superior court requesting the issuance of an order authorizing
14 the minor to consent to the performance or inducement of an abortion without the
15 consent of a parent, guardian, or custodian.

16 (b) The complaint shall be made under oath and must include all of the
17 following:

18 (1) a statement that the complainant is pregnant;

19 (2) a statement that the complainant is unmarried, under 18 years of
20 age, and unemancipated;

21 (3) a statement that the complainant wishes to have an abortion without
22 the consent of a parent, guardian, or custodian;

23 (4) an allegation of either or both of the following:

24 (A) that the complainant is sufficiently mature and well enough
25 informed to decide intelligently whether to have an abortion without the
26 consent of a parent, guardian, or custodian; or

27 (B) that one or both of the minor's parents or the minor's
28 guardian or custodian was engaged in a pattern of physical, sexual, or
29 emotional abuse against the minor, or that the consent of a parent, guardian, or
30 custodian otherwise is not in the minor's best interest;

31 (5) a statement as to whether the complainant has retained an attorney

1 and, if an attorney has been retained, the name, address, and telephone number of the
2 attorney.

3 (c) The court shall fix a time for a hearing on any complaint filed under (a)
4 of this section and shall keep a record of all testimony and other oral proceedings in
5 the action. The hearing shall be held at the earliest possible time, but not later than
6 the fifth business day after the day that the complaint is filed. The court shall enter
7 judgment on the complaint immediately after the hearing is concluded. If the hearing
8 required by this subsection is not held by the fifth business day after the complaint is
9 filed, the failure to hold the hearing shall be considered to be a constructive order of
10 the court authorizing the complainant to consent to the performance or inducement of
11 an abortion without the consent of a parent, guardian, or custodian, and the
12 complainant and any other person may rely on the constructive order to the same
13 extent as if the court actually had issued an order under this section authorizing the
14 complainant to consent to the performance or inducement of an abortion without such
15 consent.

16 (d) If the complainant has not retained an attorney, the court shall appoint an
17 attorney to represent the complainant.

18 (e) If the complainant makes only the allegation set out in (b)(4)(A) of this
19 section and if the court finds by clear and convincing evidence that the complainant
20 is sufficiently mature and well enough informed to decide intelligently whether to have
21 an abortion, the court shall issue an order authorizing the complainant to consent to
22 the performance or inducement of an abortion without the consent of a parent,
23 guardian, or custodian. If the court does not make the finding specified in this
24 subsection, it shall dismiss the complaint.

25 (f) If the complainant makes only the allegation set out in (b)(4)(B) of this
26 section and the court finds by clear and convincing evidence that there is evidence of
27 a pattern of physical, sexual, or emotional abuse of the complainant by one or both of
28 the minor's parents or the minor's guardian or custodian, or that the consent of the
29 parents, guardian, or custodian of the complainant otherwise is not in the best interest
30 of the complainant, the court shall issue an order authorizing the complainant to
31 consent to the performance or inducement of an abortion without the consent of a

1 parent, guardian, or custodian. If the court does not make the finding specified in this
2 subsection, it shall dismiss the complaint.

3 (g) If the complainant makes both of the allegations set out in (b)(4) of this
4 section, the court shall proceed as follows:

5 (1) the court first shall determine whether it can make the finding
6 specified in (e) of this section and, if so, shall issue an order under that subsection;
7 if the court issues an order under this paragraph, it may not proceed under (f) of this
8 section; if the court does not make the finding specified in (e) of this section, it shall
9 proceed under (2) of this subsection;

10 (2) if the court under (1) of this subsection does not make the finding
11 specified in (e) of this section, it shall proceed to determine whether it can make the
12 finding specified in (f) of this section and, if so, shall issue an order under that
13 subsection; if the court does not make the finding specified in (f) of this section, it
14 shall dismiss the complaint.

15 (h) The court may not notify the parents, guardian, or custodian of the
16 complainant that the complainant is pregnant or wants to have an abortion.

17 (i) If the court dismisses the complaint, the complainant has the right to appeal
18 the decision to the supreme court, and the superior court immediately shall notify the
19 complainant that there is a right to appeal.

20 (j) If the complainant files a notice of appeal authorized under this section, the
21 superior court shall deliver a copy of the notice of appeal and the record on appeal to
22 the supreme court within four days after the notice of appeal is filed. Upon receipt of
23 the notice and record, the clerk of the supreme court shall place the appeal on the
24 docket. The appellant shall file a brief within four days after the appeal is docketed.
25 Unless the appellant waives the right to oral argument, the supreme court shall hear
26 oral argument within five days after the appeal is docketed. The supreme court shall
27 enter judgment in the appeal immediately after the oral argument or, if oral argument
28 has been waived, within five days after the appeal is docketed. Upon motion of the
29 appellant and for good cause shown, the supreme court may shorten or extend the
30 maximum times set out in this subsection. However, in any case, if judgment is not
31 entered within five days after the appeal is docketed, the failure to enter the judgment

1 shall be considered to be a constructive order of the court authorizing the appellant to
2 consent to the performance or inducement of an abortion without the consent of a
3 parent, guardian, or custodian, and the appellant and any other person may rely on the
4 constructive order to the same extent as if the court actually had entered a judgment
5 under this subsection authorizing the appellant to consent to the performance or
6 inducement of an abortion without consent of another person. In the interest of justice,
7 the supreme court, in an appeal under this subsection, shall liberally modify or
8 dispense with the formal requirements that normally apply as to the contents and form
9 of an appellant's brief.

10 (k) Each hearing under this section, and all proceedings under (j) of this
11 section, shall be conducted in a manner that will preserve the anonymity of the
12 complainant. The complaint and all other papers and records that pertain to an action
13 commenced under this section, including papers and records that pertain to an appeal
14 under this section, shall be kept confidential and are not public records under
15 AS 09.25.110 - 09.25.120.

16 (l) The supreme court shall prescribe complaint and notice of appeal forms that
17 shall be used by a complainant filing a complaint or appeal under this section. The
18 clerk of each superior court shall furnish blank copies of the forms, without charge,
19 to any person who requests them.

20 (m) A filing fee may not be required of, and court costs may not be assessed
21 against, a complainant filing a complaint under this section or an appellant filing an
22 appeal under this section.

23 (n) Blank copies of the forms prescribed under (l) of this section and
24 information on the proper procedures for filing a complaint or appeal shall be made
25 available by the court system at the official location of each superior court, district
26 court, and magistrate in the state. The information required under this subsection must
27 also include notification to the minor that

28 (1) there is no filing fee required for either form;

29 (2) no court costs will be assessed against the minor for procedures
30 under this section;

31 (3) an attorney will be appointed to represent the minor if the minor

1 does not retain an attorney;

2 (4) the minor may request that the superior court with appropriate
3 jurisdiction hold a telephonic hearing on the complaint so that the minor need not
4 personally be present.

5 **Sec. 18.16.090. Definitions.** In this chapter,

6 (1) "abortion" means the use or prescription of an instrument, medicine,
7 drug, or other substance or device to terminate the pregnancy of a woman known to
8 be pregnant, except that "abortion" does not include the termination of a pregnancy if
9 done with the intent to

10 (A) save the life or preserve the health of the unborn child;

11 (B) deliver the unborn child prematurely to preserve the health
12 of both the pregnant woman and the woman's child; or

13 (C) remove a dead unborn child;

14 (2) "unemancipated" means that a woman who is unmarried and under
15 18 years of age has not done any of the following:

16 (A) entered the armed services of the United States;

17 (B) become employed and self-subsisting;

18 (C) been emancipated under AS 09.55.590; or

19 (D) otherwise become independent from the care and control of
20 the woman's parent, guardian, or custodian.

21 * Sec. 5. AS 44.21.410(a) is amended to read:

22 (a) The office of public advocacy shall

23 (1) perform the duties of the public guardian under AS 13.26.360 -
24 13.26.410;

25 (2) provide visitors and experts in guardianship proceedings under
26 AS 13.26.131;

27 (3) provide guardian ad litem services to children in child protection
28 actions under AS 47.17.030(e) and to wards and respondents in guardianship
29 proceedings who will suffer financial hardship or become dependent upon a
30 government agency or a private person or agency if the services are not provided at
31 state expense under AS 13.26.112;

1 (4) provide legal representation in cases involving judicial bypass
2 procedures for minors seeking abortions under AS 18.16.030, in guardianship
3 proceedings to respondents who are financially unable to employ attorneys under
4 AS 13.26.106(b), to indigent parties in cases involving child custody in which the
5 opposing party is represented by counsel provided by a public agency, to indigent
6 parents or guardians of a minor respondent in a commitment proceeding concerning
7 the minor under AS 47.30.775;

8 (5) provide legal representation and guardian ad litem services under
9 AS 25.24.310; in cases arising under AS 47.15 (Uniform Interstate Compact on
10 Juveniles); in cases involving petitions to adopt a minor under AS 25.23.125(b) or
11 petitions for the termination of parental rights on grounds set out in
12 AS 25.23.180(c)(3); in cases involving petitions to remove the disabilities of a minor
13 under AS 09.55.590; in children's proceedings under AS 47.10.050(a) or under
14 AS 47.12.090; in cases involving appointments under AS 18.66.100(a) in petitions for
15 protective orders on behalf of a minor; and in cases involving indigent persons who
16 are entitled to representation under AS 18.85.100 and who cannot be represented by
17 the public defender agency because of a conflict of interests;

18 (6) develop and coordinate a program to recruit, select, train, assign,
19 and supervise volunteer guardians ad litem from local communities to aid in delivering
20 services in cases in which the office of public advocacy is appointed as guardian ad
21 litem;

22 (7) provide guardian ad litem services in proceedings under
23 AS 12.45.046;

24 (8) establish a fee schedule and collect fees for services provided by
25 the office, except as provided in AS 18.85.120 or when imposition or collection of a
26 fee is not in the public interest as defined under regulations adopted by the
27 commissioner of administration;

28 (9) provide visitors and guardians ad litem in proceedings under
29 AS 47.30.839;

30 (10) provide legal representation to indigent parents under
31 AS 14.30.195(e).

1 * Sec. 6. AS 18.16.010(d) is repealed.

2 * Sec. 7. AS 18.16.030(c), added by sec. 4 of this Act, has the effect of amending Rule
3 40, Alaska Rules of Civil Procedure, by setting a specific timetable for hearing certain cases.

4 * Sec. 8. AS 18.16.030(j), added by sec. 4 of this Act, has the effect of amending Rules
5 204, 210, 212, and 213, Alaska Rules of Appellate Procedure, by establishing specific time
6 limits applicable to certain appeals and by instructing the supreme court to modify or dispense
7 with formal requirements applicable to certain briefs.

8 * Sec. 9. AS 18.16.030(k), added by sec. 4 of this Act, has the effect of amending Rule
9 512.5, Alaska Rules of Appellate Procedure, by making certain appellate records and papers
10 confidential.

11 * Sec. 10. AS 18.16.030(m), added by sec. 4 of this Act, has the effect of amending Rule
12 9, Alaska Administrative Rules; Rule 79, Alaska Rules of Civil Procedure; and Rule 508,
13 Alaska Rules of Appellate Procedure, by prohibiting filing fees and assessment of court costs
14 in certain actions.

Lisa's Copy

0-LS0227F
Lauterbach
3/4/97

CS FOR HOUSE BILL NO. 37()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTIETH LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES KELLY, KOHRING, VEZEY, AND MULDER. Ogan, Dyson, Martin

A BILL
FOR AN ACT ENTITLED

1 "An Act relating to a requirement that a parent, guardian, or custodian consent
2 before certain minors receive an abortion; establishing a judicial bypass procedure
3 by which a minor may petition a court for authorization to consent to an
4 abortion without consent of a parent, guardian, or custodian; amending the
5 definition of 'abortion'; and amending Rules 40 and 79, Alaska Rules of Civil
6 Procedure; Rules 204, 210, 212, 213, 508, and 512.5, Alaska Rules of Appellate
7 Procedure; and Rule 9, Alaska Administrative Rules."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. PURPOSE; FINDINGS. (a) It is the intent of the legislature in enacting this
10 Act to further the important and compelling state interests of
11 (1) protecting minors against their own immaturity;
12 (2) fostering the family structure and preserving it as a viable social unit;

1 (3) protecting the rights of parents to rear children who are members of their
2 household; and

3 (4) protecting the health of minor women.

4 (b) The legislature finds that

5 (1) immature minors often lack the ability to make fully informed choices that
6 take account of both immediate and long-range consequences;

7 (2) the physical, emotional, and psychological consequences of abortion are
8 serious and can be lasting particularly when the patient is immature;

9 (3) the capacity to become pregnant and the capacity for mature judgment
10 concerning the wisdom of an abortion are not necessarily related;

11 (4) parents ordinarily possess information essential to a physician's or
12 surgeon's best medical judgment concerning the child;

13 (5) parents who are aware that their minor daughter has had an abortion may
14 better ensure that the daughter receives adequate medical attention after the abortion;

15 (6) parental consultation is usually desirable and in the best interest of the
16 minor; and

17 (7) parental involvement legislation enacted in other states has shown to have
18 a significant effect in reducing abortion, birth, and pregnancy rates among minors.

19 * Sec. 2. AS 18.16.010(a) is amended to read:

20 (a) An abortion may not be performed in this state unless

21 (1) the abortion is performed by a physician or surgeon licensed by the
22 State Medical Board under AS 08.64.200;

23 (2) the abortion is performed in a hospital or other facility approved for
24 the purpose by the Department of Health and Social Services or a hospital operated by
25 the federal government or an agency of the federal government;

26 (3) before an abortion is knowingly performed or induced on an
27 unmarried, unemancipated woman under 18 years of age, consent has been given
28 as required under AS 18.16.020 or a court has authorized the minor to consent
29 to the abortion under AS 18.16.030 and the minor consents; for purposes of
30 enforcing this paragraph, there is a rebuttable presumption that a woman who
31 is unmarried and under 18 years of age is unemancipated [CONSENT HAS BEEN

1 RECEIVED FROM THE PARENT OR GUARDIAN OF AN UNMARRIED WOMAN
2 LESS THAN 18 YEARS OF AGE]; and

3 (4) the woman is domiciled or physically present in the state for 30
4 days before the abortion.

5 * Sec. 3. AS 18.16.010 is amended by adding new subsections to read:

6 (e) A person who performs or induces an abortion in violation of (a)(3) of this
7 section is civilly liable to the pregnant minor and the minor's parents, guardian, or cus-
8 todian for compensatory and punitive damages.

9 (f) It is an affirmative defense to a prosecution or claim for a violation of
10 (a)(3) of this section that the pregnant minor provided the person who performed or
11 induced the abortion with false, misleading, or incorrect information about the minor's
12 age, marital status, or emancipation, and the person who performed or induced the
13 abortion did not otherwise have reasonable cause to believe that the pregnant minor
14 was under 18 years of age, unmarried, or unemancipated.

15 (g) It is an affirmative defense to a prosecution or claim for violation of (a)(3)
16 of this section that compliance with the requirements of (a)(3) of this section was not
17 possible because an immediate threat of serious risk to the life or physical health of
18 the pregnant minor from the continuation of the pregnancy created a medical
19 emergency necessitating the immediate performance or inducement of an abortion. In
20 this subsection, "medical emergency" means a condition that, on the basis of the
21 physician's or surgeon's good faith clinical judgment, so complicates the medical
22 condition of a pregnant minor that

23 (1) an immediate abortion of the minor's pregnancy is necessary to
24 avert the minor's death; or

25 (2) a delay in providing an abortion will create serious risk of
26 substantial and irreversible impairment of a major bodily function of the pregnant
27 minor.

28 * Sec. 4. AS 18.16 is amended by adding new sections to read:

29 **Sec. 18.16.020. Consent required before minor's abortion.** A person may
30 not knowingly perform or induce an abortion upon a minor who is known to the
31 person to be pregnant, unmarried, under 18 years of age, and unemancipated unless,

1 before the abortion, at least one of the following applies:

2 (1) one of the minor's parents or the minor's guardian or custodian has
3 consented in writing to the performance or inducement of the abortion;

4 (2) a court issues an order under AS 18.16.030 authorizing the minor
5 to consent to the abortion without consent of a parent, guardian, or custodian, and the
6 minor consents to the abortion; or

7 (3) a court, by its inaction under AS 18.16.030, constructively has
8 authorized the minor to consent to the abortion without consent of a parent, guardian,
9 or custodian, and the minor consents to the abortion.

10 **Sec. 18.16.030. Judicial bypass for minor seeking an abortion.** (a) A
11 woman who is pregnant, unmarried, under 18 years of age, and unemancipated who
12 wishes to have an abortion without the consent of a parent, guardian, or custodian may
13 file a complaint in the superior court requesting the issuance of an order authorizing
14 the minor to consent to the performance or inducement of an abortion without the
15 consent of a parent, guardian, or custodian.

16 (b) The complaint shall be made under oath and must include all of the
17 following:

18 (1) a statement that the complainant is pregnant;

19 (2) a statement that the complainant is unmarried, under 18 years of
20 age, and unemancipated;

21 (3) a statement that the complainant wishes to have an abortion without
22 the consent of a parent, guardian, or custodian;

23 (4) an allegation of either or both of the following:

24 (A) that the complainant is sufficiently mature and well enough
25 informed to decide intelligently whether to have an abortion without the
26 consent of a parent, guardian, or custodian; or

27 (B) that one or both of the minor's parents or the minor's
28 guardian or custodian was engaged in a pattern of physical, sexual, or
29 emotional abuse against the minor, or that the consent of a parent, guardian, or
30 custodian otherwise is not in the minor's best interest;

31 (5) a statement as to whether the complainant has retained an attorney

1 and, if an attorney has been retained, the name, address, and telephone number of the
2 attorney.

3 (c) The court shall fix a time for a hearing on any complaint filed under (a)
4 of this section and shall keep a record of all testimony and other oral proceedings in
5 the action. The hearing shall be held at the earliest possible time, but not later than
6 the fifth business day after the day that the complaint is filed. The court shall enter
7 judgment on the complaint immediately after the hearing is concluded. If the hearing
8 required by this subsection is not held by the fifth business day after the complaint is
9 filed, the failure to hold the hearing shall be considered to be a constructive order of
10 the court authorizing the complainant to consent to the performance or inducement of
11 an abortion without the consent of a parent, guardian, or custodian, and the
12 complainant and any other person may rely on the constructive order to the same
13 extent as if the court actually had issued an order under this section authorizing the
14 complainant to consent to the performance or inducement of an abortion without such
15 consent.

16 (d) If the complainant has not retained an attorney, the court shall appoint an
17 attorney to represent the complainant.

18 (e) If the complainant makes only the allegation set out in (b)(4)(A) of this
19 section and if the court finds by clear and convincing evidence that the complainant
20 is sufficiently mature and well enough informed to decide intelligently whether to have
21 an abortion, the court shall issue an order authorizing the complainant to consent to
22 the performance or inducement of an abortion without the consent of a parent,
23 guardian, or custodian. If the court does not make the finding specified in this
24 subsection, it shall dismiss the complaint.

25 (f) If the complainant makes only the allegation set out in (b)(4)(B) of this
26 section and the court finds by clear and convincing evidence that there is evidence of
27 a pattern of physical, sexual, or emotional abuse of the complainant by one or both of
28 the minor's parents or the minor's guardian or custodian, or that the consent of the
29 parents, guardian, or custodian of the complainant otherwise is not in the best interest
30 of the complainant, the court shall issue an order authorizing the complainant to
31 consent to the performance or inducement of an abortion without the consent of a

1 parent, guardian, or custodian. If the court does not make the finding specified in this
2 subsection, it shall dismiss the complaint.

3 (g) If the complainant makes both of the allegations set out in (b)(4) of this
4 section, the court shall proceed as follows:

5 (1) the court first shall determine whether it can make the finding
6 specified in (e) of this section and, if so, shall issue an order under that subsection;
7 if the court issues an order under this paragraph, it may not proceed under (f) of this
8 section; if the court does not make the finding specified in (e) of this section, it shall
9 proceed under (2) of this subsection:

10 (2) if the court under (1) of this subsection does not make the finding
11 specified in (e) of this section, it shall proceed to determine whether it can make the
12 finding specified in (f) of this section and, if so, shall issue an order under that
13 subsection: if the court does not make the finding specified in (f) of this section, it
14 shall dismiss the complaint.

15 (h) The court may not notify the parents, guardian, or custodian of the
16 complainant that the complainant is pregnant or wants to have an abortion.

17 (i) If the court dismisses the complaint, the complainant has the right to appeal
18 the decision to the supreme court, and the superior court immediately shall notify the
19 complainant that there is a right to appeal.

20 (j) If the complainant files a notice of appeal authorized under this section, the
21 superior court shall deliver a copy of the notice of appeal and the record on appeal to
22 the supreme court within four days after the notice of appeal is filed. Upon receipt of
23 the notice and record, the clerk of the supreme court shall place the appeal on the
24 docket. The appellant shall file a brief within four days after the appeal is docketed.
25 Unless the appellant waives the right to oral argument, the supreme court shall hear
26 oral argument within five days after the appeal is docketed. The supreme court shall
27 enter judgment in the appeal immediately after the oral argument or, if oral argument
28 has been waived, within five days after the appeal is docketed. Upon motion of the
29 appellant and for good cause shown, the supreme court may shorten or extend the
30 maximum times set out in this subsection. However, in any case, if judgment is not
31 entered within five days after the appeal is docketed, the failure to enter the judgment

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shall be considered to be a constructive order of the court authorizing the appellant to consent to the performance or inducement of an abortion without the consent of a parent, guardian, or custodian, and the appellant and any other person may rely on the constructive order to the same extent as if the court actually had entered a judgment under this subsection authorizing the appellant to consent to the performance or inducement of an abortion without consent of another person. In the interest of justice, the supreme court, in an appeal under this subsection, shall liberally modify or dispense with the formal requirements that normally apply as to the contents and form of an appellant's brief.

(k) Each hearing under this section, and all proceedings under (j) of this section, shall be conducted in a manner that will preserve the anonymity of the complainant. The complaint and all other papers and records that pertain to an action commenced under this section, including papers and records that pertain to an appeal under this section, shall be kept confidential and are not public records under AS 09.25.110 - 09.25.120.

(l) The supreme court shall prescribe complaint and notice of appeal forms that shall be used by a complainant filing a complaint or appeal under this section. The clerk of each superior court shall furnish blank copies of the forms, without charge, to any person who requests them.

(m) A filing fee may not be required of, and court costs may not be assessed against, a complainant filing a complaint under this section or an appellant filing an appeal under this section.

(n) Blank copies of the forms prescribed under (l) of this section and information on the proper procedures for filing a complaint or appeal shall be made available by the court system at the official location of each superior court, district court, and magistrate in the state. The information required under this subsection must also include notification to the minor that

- (1) there is no filing fee required for either form;
- (2) no court costs will be assessed against the minor for procedures under this section;
- (3) an attorney will be appointed to represent the minor if the minor

1 does not retain an attorney;

2 (4) the minor may request that the superior court with appropriate
3 jurisdiction hold a telephonic hearing on the complaint so that the minor need not
4 personally be present.

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6 (1) "abortion" means the use or prescription of an instrument, medicine,
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8 be pregnant, except that "abortion" does not include the termination of a pregnancy if
9 done with the intent to

10 (A) save the life or preserve the health of the unborn child;

11 (B) deliver the unborn child prematurely to preserve the health
12 of both the pregnant woman and the woman's child; or

13 (C) remove a dead unborn child;

14 (2) "unemancipated" means that a woman who is unmarried and under
15 18 years of age has not done any of the following:

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17 (B) become employed and self-subsisting;

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19 (D) otherwise become independent from the care and control of
20 the woman's parent, guardian, or custodian.

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28 actions under AS 47.17.030(e) and to wards and respondents in guardianship
29 proceedings who will suffer financial hardship or become dependent upon a
30 government agency or a private person or agency if the services are not provided at
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17 the public defender agency because of a conflict of interests;

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25 the office, except as provided in AS 18.35.120 or when imposition or collection of a
26 fee is not in the public interest as defined under regulations adopted by the
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14 in certain actions.

Alaska State Legislature

REPRESENTATIVE
PETER KELLY

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House District 31

House Of Representatives

MEMORANDUM

TO: House Judiciary Committee

FROM: Representative Pete Kelly *Pete*

DATE: 7 March 1997

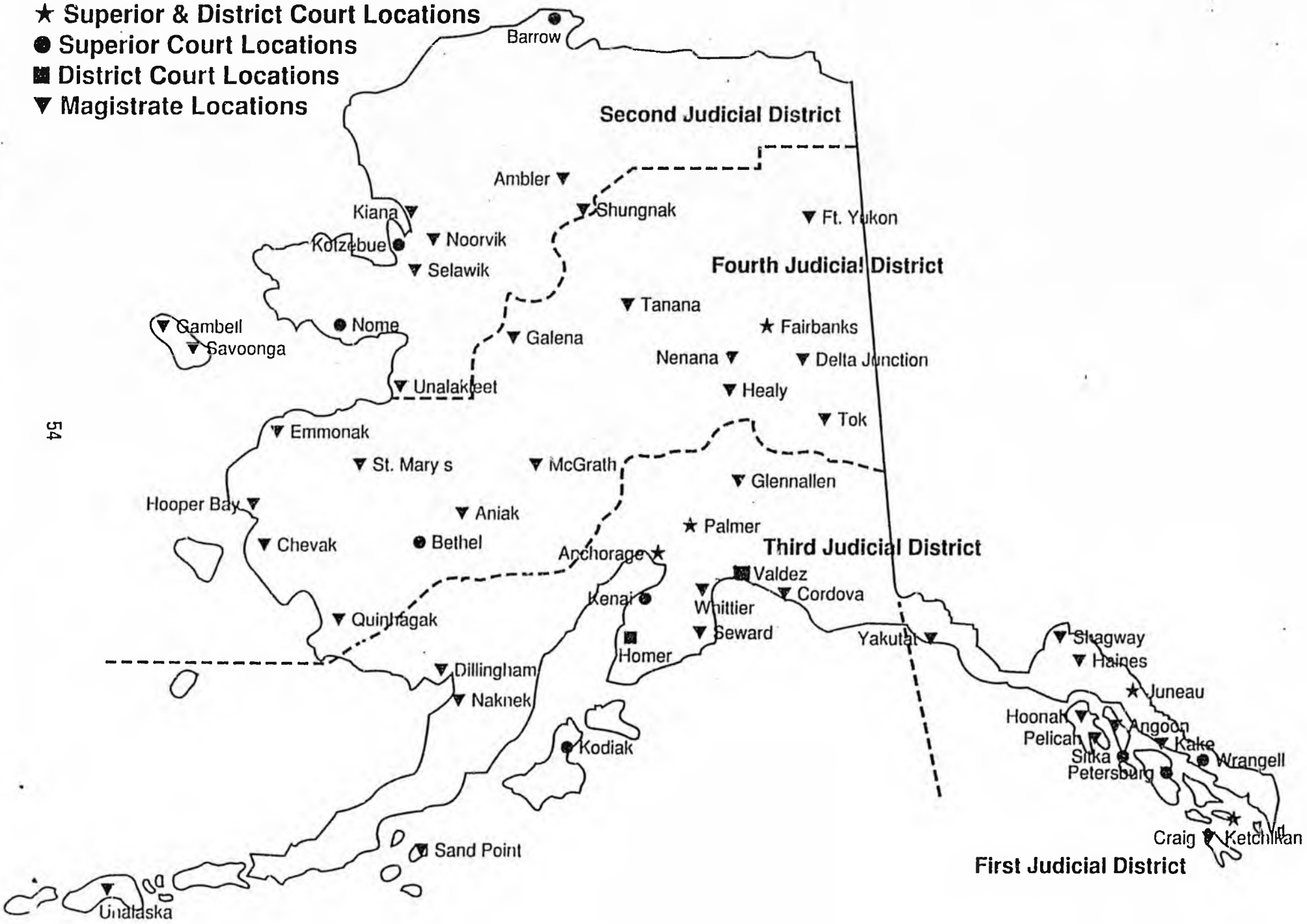
RE: House Bill 37 -- Committee Substitute (version F)
Court Locations

Subsection (n) on page 7 mandates that information on the proper procedures for filing an appeal shall be made available by the court system. Each superior court, district court, and magistrate in the state is an official location of the superior court system. I attached a map showing these locations throughout the state. This language addresses the concerns of many that girls in villages will not have access to the judicial procedure. This map speaks to the contrary.

Keep in mind, however, that the judicial bypass procedure is far more accessible than an abortion in this state. Few communities have staffed facilities to perform abortions. Girls in rural areas will have to travel to an urban community to obtain the procedure.

ALASKA COURT LOCATIONS

- ★ Superior & District Court Locations
- Superior Court Locations
- District Court Locations
- ▼ Magistrate Locations



54

Alaska State Legislature

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House District 31

House Of Representatives

MEMORANDUM

TO: House Judiciary Committee

FROM: Representative Pete Kelly 

DATE: 4 March 1997

RE: House Bill 37
Committee Substitute

The CS for House Bill 37 incorporates the following changes:

(1) Page 7, following line 21. Inserts a new subsection to read:

(n) Blank copies of the forms prescribed under (1) of this section and information on the proper procedures for filing a complaint or appeal shall be made available by the court system at the official location of each superior court system at the official location of each superior court, district court, and magistrate in the state. The information required under this subsection must also include notification to the minor that

- (1) there is no filing fee required for either form;
- (2) no court costs will be assessed against the minor for procedures under this section;
- (3) an attorney will be appointed to represent the minor if the minor does not retain an attorney;
- (4) the minor may request that the superior court with appropriate jurisdiction hold a telephonic hearing on the complaint so that the minor need not personally be present.

(2) Page 2, Line 25. A technical change is required here, in order to make the language consistent with the rest of the bill:

(3) before an abortion is knowingly performed or induced on an unmarried,....

(3) There are several instances in the bill where the word "woman" is used to describe the pregnant minor. At least in common usage, the term woman implies an adult female, and to that extent this wording can cause confusion. Given the context of the bill, it is unlikely a court would be confused on the meaning, but the public might. We think it is an important distinction, since the Constitutional rights of minors and adults with respect to abortion are very differently interpreted by the Supreme Court. Accordingly, I have substituted the term "minor" or "minor's" in the following areas where the terms "woman" or "woman's" are employed:

Page 3:

Line 6 (both references)
Line 9
Line 11
Line 13
Line 17
Line 21
Line 22
Line 23
Line 26
Line 29

Page 4:

Line 1 (both references)
Line 3
Line 5
Line 7
Line 8
Line 13
Line 26 (both references)
Line 28
Line 29

Page 5:

Line 27 (both references)

Alaska State Legislature

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House District 31

House Of Representatives

MEMORANDUM

TO: House Judiciary Committee

FROM: Representative Pete Kelly 

DATE: 5 March 1997

RE: Corrected Line References
House Bill 37
Committee Substitute

The CS for House Bill 37 incorporates the following changes:

(1) Page 7, following line 22. Inserts a new subsection to read:

(n) Blank copies of the forms prescribed under (1) of this section and information on the proper procedures for filing a complaint or appeal shall be made available by the court system at the official location of each superior court system at the official location of each superior court, district court, and magistrate in the state. The information required under this subsection must also include notification to the minor that

- (1) there is no filing fee required for either form;
- (2) no court costs will be assessed against the minor for procedures under this section;
- (3) an attorney will be appointed to represent the minor if the minor does not retain an attorney;
- (4) the minor may request that the superior court with appropriate jurisdiction hold a telephonic hearing on the complaint so that the minor need not personally be present.

(2) Page 2, Line 26. A technical change is required here, in order to make the language consistent with the rest of the bill:

(3) before an abortion is knowingly performed or induced on an unmarried,....

(3) There are several instances in the bill where the word "woman" is used to describe the pregnant minor. At least in common usage, the term woman implies an adult female, and to that extent this wording can cause confusion. Given the context of the bill, it is unlikely a court would be confused on the meaning, but the public might. We think it is an important distinction, since the Constitutional rights of minors and adults with respect to abortion are very differently interpreted by the Supreme Court. Accordingly, I have substituted the term "minor" or "minor's" in the following areas where the terms "woman" or "woman's" are employed:

Page 3:

Line 7 (both references)
Line 10
Line 12
Line 14
Line 18
Line 22
Line 23
Line 24
Line 27
Line 30

Page 4:

Line 2 (both references)
Line 4
Line 6
Line 8
Line 9
Line 14
Line 27 (both references)
Line 29
Line 30

Page 5:

Line 28 (both references)

Alaska State Legislature

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House District 31

House Of Representatives

Sectional Analysis

CSHB 37

Parental Consent for Minor's Abortion

Section 1: Purpose and Legislative findings

- Intent of legislation is to protect the health and welfare of minors, foster and preserve the family structure as a viable social unit, and protect the rights of parents to rear their children.
- The legislature finds that parents often possess information on the medical history of the minor that is essential to a physician's or surgeon's medical judgement.
- The legislature also finds that minors stand to benefit from parental counsel; the capacity to become pregnant and the capacity for mature judgment concerning the wisdom of an abortion are not necessarily related.

Section 2: Amends Title 18 of Alaska Statutes (Health & Safety)

- Repeals existing language on parental consent [AS 18.16.010(a)(3)] and replaces it with language requiring either parental consent or court authorization before an abortion can be performed on an unemancipated minor. The bill establishes a rebuttable presumption that an unmarried woman under 18 is unemancipated.

Section 3: Establishes new subsections under AS 18.16.010 (Regulation of Abortions)

- Person who performs an abortion without obtaining the required consent is civilly liable to the minor's parent(s) or guardian for compensatory and punitive damages.
- It is an affirmative defense to prosecution if the person performing the abortion was provided by the pregnant minor with false, misleading, or incorrect information about age, marital status, or emancipation.
- It is an affirmative defense to prosecution if the person performing the abortion could not comply with the consent requirement because the continuation of the

pregnancy posed an immediate threat of serious risk to the life or physical health of the pregnant woman, necessitating an immediate abortion.

**Section 4: Establishes new sections under AS 18.16
(Regulation of Abortions)**

- Sec. 18.16.020 provides that an abortion may not be performed on an unemancipated minor unless...
 1. one of the minor's parents or the minor's guardian has consented to the procedure in writing; or
 2. a court has issued an order permitting the minor to consent to the abortion without obtaining consent of a parent or guardian; or
 3. a court by its inaction has constructively authorized a minor to consent to the abortion (see Sec. 18.16.030).

- Sec. 18.16.030 outlines the procedure for seeking a court order (judicial bypass) allowing a minor to consent to an abortion without first securing parental consent. Complaints must be filed in superior court. Complaint must be under oath and include a statement that the complainant is pregnant, unmarried, under age 18, unemancipated, and wishes to have an abortion without obtaining parental consent. In addition, the complainant must allege that she is sufficiently mature and well-informed to make an abortion decision without parental consent and/or that one or both of her parents or her guardian is abusing the complainant physically, sexually, or emotionally; or that securing consent is otherwise not in the woman's best interest. Sec. 18.16.030 also sets time limits for hearing complaints; establishes an appeals process; requires appointment of an attorney for complainants who have not retained counsel; provides for the anonymity of the complainant. If a court does not act on a complaint within the time limits established in the legislation, it shall be considered a "constructive order" allowing the minor to consent to the abortion without the consent of a parent or guardian.

- Sec. 18.16.090 defines the terms "abortion" and "unemancipated".

Section 5: Amends Title 44 of Alaska Statutes (State Government)

- Sec. 44.21.410(a) is amended to require the Office of Public Advocacy to provide legal representation for minors seeking a court order for an abortion without parental consent.

Section 6: Repeals Alaska Statute 18.16.010(d)

- The existing definition of abortion under AS 18.16 (Regulation of Abortions) is repealed (replaced with new definition @ Sec. 18.16.090).

Section 7: Amending Rule 40, Alaska Rules of Civil Procedure

- Sec. 18.16.030(c) of the bill has the effect of amending Rule 40 by setting time limits for hearing judicial bypass cases.

**Section 8: Amending Rules 204, 210, 212, and 213,
Alaska Rules of Appellate Procedure**

- Sec. 18.16.030(j) of the bill has the effect of amending Rules 204, 210, 212, and 213, by setting time limits for judicial bypass appeals, and also by liberally modifying or dispensing with formal requirements for the form and content of appellants' briefs.

Section 9: Amending Rule 512.5, Alaska Rules of Appellate Procedure

- Sec. 18.16.030(k) of the bill has the effect of amending Rule 512.5 by making certain appellate records and papers confidential.

**Section 10: Amending Rule 9, Alaska Administrative Rules; Rule 79,
Alaska Rules of Civil Procedure; and Rule 508, Alaska Rules of
Appellate Procedure.**

- Sec. 18.16.030(m) of the bill has the effect of amending Rule 9, Rule 79, and Rule 508 by prohibiting filing fees and court cost assessments in judicial bypass cases.

Alaska State Legislature

REPRESENTATIVE
PETER KELLY
Mailing Address:
119 N. Cushman, Suite 203
Fairbanks, Alaska 99701
(907) 456-8161



While in Juneau
State Capitol
Juneau, Alaska
99901-1182
(907) 465-2327
House District 31

House Of Representatives

Sponsor Statement

CSHB 37

Parental Consent for Minor's Abortion

House Bill 37 allows enforcement of existing law requiring parental consent before an abortion can be performed on a minor. Parental consent is required under AS 18.16.010, approved by the legislature in 1970. However, a 1976 Attorney General's Opinion declared the statute unenforceable as it lacks a judicial bypass provision which would enable a minor to receive permission from a judge as an alternative to a parent. Various Supreme Court decisions have held that judicial bypass is necessary if parental consent laws are to meet constitutional muster. HB 37 adds the necessary bypass.

In other states, parental involvement laws have had a positive impact, reducing both the number of abortions *and* the number of teen pregnancies. During the first six years Minnesota's parental involvement law was in effect, the teen pregnancy rate fell 20.5 percent, teen abortions declined 27.4 percent, and the teen birth rate went down 12.5 percent.

HB 37 also upholds the rights of parents, which are uniquely disregarded in the area of abortion. Parental consent is required for virtually every medical procedure. An exception should not exist for abortion. In Alaska, young people under 18 are not considered mature enough to be served alcohol, buy cigarettes, or vote in elections. Even marriage is not permitted unless a parent consents. But a teenager can obtain an abortion, even one paid for by the State, and the parents are not required to be notified of the fact.

A clear majority of Alaskans (78%) expressed support for parental consent legislation considered in the 19th Legislature. Parental involvement laws are on the books in 38 states. These statutes are enforced in 27 of these states.

Alaska State Legislature

REPRESENTATIVE

PETER KELLY

Mailing Address:

119 N. Cushman, Suite 203

Fairbanks, Alaska 99701

(907) 456-8161

Write in Juneau

State Capitol

Juneau, Alaska

99801-1182

(907) 465-2327

House District 31

House Of Representatives

Modified Sectional Analysis

House Bill 37

Parental Consent for Minor's Abortion

Section 1: Purpose and Legislative findings

- Intent of legislation is to protect the health and welfare of minors, foster and preserve the family structure as a viable social unit, and protect the rights of parents to rear their children.
- The legislature finds that parents often possess information on the medical history of the minor that is essential to a physician's or surgeon's medical judgement.
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 3. a court by its inaction has constructively authorized a minor to consent to the abortion (see Sec. 18.16.030).
- Sec. 18.16.030 outlines the procedure for seeking a court order (judicial bypass) allowing a minor to consent to an abortion without first securing parental consent. Complaints must be filed in superior court. Complaint must be under oath and include a statement that the complainant is pregnant, unmarried, under age 18, unemancipated, and wishes to have an abortion without obtaining parental consent. In addition, the complainant must allege that she is sufficiently mature and well-informed to make an abortion decision without parental consent and/or that one or both of her parents or her guardian is abusing the complainant physically, sexually, or emotionally; or that securing consent is otherwise not in the woman's best interest. Sec. 18.16.030 also sets time limits for hearing complaints; establishes an appeals process; requires appointment of an attorney for complainants who have not retained counsel; provides for the anonymity of the complainant. If a court does not act on a complaint within the time limits established in the legislation, it shall be considered a "constructive order" allowing the minor to consent to the abortion without the consent of a parent or guardian.

New subsection (n) was added to Sec. 18.16.030 [page 7, lines 22-31 & page 8, lines 1-3]. This subsection provides that the forms and information enabling a minor to seek judicial bypass must be available at every superior court, district court, and magistrate location. It further prescribes that the information provided to the minor must include notification that no filing fee is required for the judicial bypass application, no court costs will be assessed against the minor, an attorney will be appointed to the minor, and that the minor may request a telephonic hearing on her complaint so that she need not be personally present in court.

- Sec. 18.16.090 defines the terms "abortion" and "unemancipated".

Section 5: Amends Title 44 of Alaska Statutes (State Government)

- Sec. 44.21.410(a) is amended to require the Office of Public Advocacy to provide legal representation for minors seeking a court order for an abortion without parental consent.

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League of Women Voters of Anchorage

P. O. Box 101345, Anchorage, AK 99510-1345 (274-8477)

February 27, 1997

RECEIVED

MAR 04 1997

The Honorable Joe Green, Chair
House Judiciary Committee
Alaska State Legislature
State Capitol
Juneau, Alaska 99801-1182

Dear Representative Green:

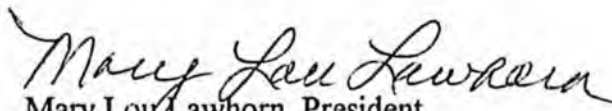
The League of Women Voters of Anchorage opposes CSHB37. This bill is poor public policy and we urge you to oppose it.

The judicial bypass procedure would not readily be available to minors. To have to apply to a court for the petition, places them in an unfamiliar setting with little assistance. Some minors may seek illegal abortions rather than face the process required by this legislation. Illegal abortions can result in damage to the reproductive system and have resulted in death. In addition, judicial bypass could be hazardous to the health of pregnant minors by delaying treatment until the second trimester.

There are many reasons a young woman might avoid disclosure of a pregnancy to a parent: Physical and mental abuse, cultural ostracism, incest, rape, and poverty are only a few. We should not erect barriers that prevent young people from seeking important health care.

The League of Women Voters believes in freedom of reproduction choice and the right to privacy. Again, we urge you to oppose CSHB37.

Sincerely yours,


Mary Lou Lawhorn, President
League of Women Voters of Anchorage



February 16, 1997

Reference: H.B. 37

Dear Representative Kelly:

I am a physician in private practice specializing in family medicine. I naturally treat many children and adolescents on a daily basis. I need parental consent in order to even evaluate a minor, much less perform a procedure.

It is totally incongruous to me that our State should allow an abortion to be performed upon an adolescent or younger child without parental consent. I have found that children even as old as 18 frequently cannot tell me their drug allergies or other details of their medical history.


Teens and preteens tend to be short sighted in highly stressful situations for many reasons, such as fear of immediate consequences, with less appreciation of long term consequences. I have counseled teens with a crisis pregnancy. Abortion at those times is a quick fix; risks seem unimportant and something that "won't happen to me."

An unemancipated teen requires parental consent to allow me to pierce their ears or take off a mole-very minor procedures which are relatively very low risk. Abortion has serious potential risks that can affect a young girl well into her adulthood. As you know, in addition to the immediate risk of infection, bleeding and perforation, there are long term effects such as the increased risk of ectopic pregnancy and infertility, and possibly even an increased risk of breast cancer-not to mention the possibility of a post traumatic stress type syndrome which frequently occurs as late as 7-12 years after abortion.

Parents must be required to consent to operative procedures performed upon their children-abortion certainly should not be an exception. There is of course judicial bypass for children who are truly endangered by parental disclosure.

There is another effect upon public health which parental consent for abortion has repeatedly caused, that should not be minimized. States which require parental consent have lower teen pregnancy rates. Isn't it time to do something that will lower the teen pregnancy rate for a change?

Sincerely yours,


Irene Lohkamp, M.D.

Dr. Ilona J. Hodson Farr, M.D.
3945 Geneva Place
~~Anchorage AK 99508-5055~~

February 18, 1997

Representative Pete Kelly
Alaska State Capitol Building
Juneau AK 99801

Dear Representative Kelly:

~~I am a female family physician, practicing in Anchorage. I~~
I have been licensed to practice medicine since 1986. I am writing to offer my professional medical opinion in support of SB 24 and HB 37, which require parental consent for abortions in women under 18 years of age. I think it is very important for parents to be involved in this life changing process.

I think this would deter some teen pregnancies, as abortion could no longer be used as a secret form of birth control behind parent's backs. -- often teens are rushed into this procedure because of shock, fear, and time constraints and aren't aware of the true ramifications of this procedure.

Many teens seek abortions because of fear of parental reaction. Yes, parents are often initially shocked, angry, and embarrassed when their teens get pregnant; but most of them end up helping during and after pregnancy, and look forward to their grandchildren. Many teens want to keep their babies, but only choose abortion because of pressure from boyfriends or fear of parental reaction. Often it isn't what they truly want. Many end up pregnant again soon after an abortion because of depression, and guilt feelings about destroying their previous unborn children. This depression often recurs throughout their life.

Some women end up with fertility problems later in life because of problems related to abortions, including scarring from the procedure itself, infections related to the procedure, or cervical incompetence (which causes problems in carrying future pregnancies). Also, the severe emotional trauma associated with the termination of a pregnancy.

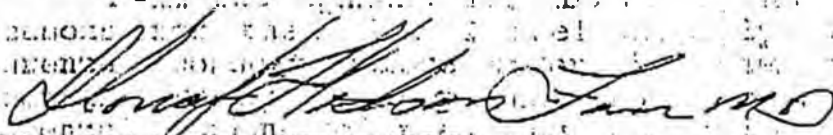
I find it hard to believe that parents are not involved in the decision involving a surgical procedure on the children they are legally responsible for. The risk of death from a termination (i.e., an abortion) is 1 to 2 per 100,000 abortions, which can increase to about 115 per 100,000 abortions with termination later in pregnancy, once the baby is more fully developed. The risk of perforations of the uterus, which can result in hemorrhage, injury to the bowel, infections, and may result in hysterectomy or death is 1 per 1,000. Also, patients can have adverse reactions to anesthetics, ranging from syncope

to convulsions to anaphylaxis with death. Women can bleed severely, often requiring IV fluids blood transfusions which ~~increase the risk of acquiring HIV, hepatitis, CMV, and other blood borne diseases.~~ Abortion is not a benign procedure and parental consent should be required, like it is for all other surgeries.

I am not against all abortions, as there are many medical reasons for them, but I feel strongly that women should have parental consent before undergoing them and counseling from a neutral agency showing what abortion does to a baby, what parental responsibilities they will face caring for a child, and their options regarding adoption. For rural areas, a video could be used to convey this information followed by counseling from maternal child health nurses, public health nurses, or even village health aides. Enforcement of child support laws against teenage males would also force them to take responsibility, and likewise help decrease teenage pregnancy rates.

In summary, I am in favor of parental consent as I feel it would help deter teenage pregnancies; help teens make the wisest choices for themselves and their families; help prevent decisions to have an abortion based upon the shock, fear, and initial panic reactions to pregnancy that teens commonly have; and prevent teenagers from making an uninformed and ill advised decision to undergo a serious medical procedure which can potentially be fatal, or result in life-long medical and/or mental problems. If you have any questions, I can be reached at my work phone number which is (907) 562-2070.

Sincerely,



Ilona J. Rodson Farr, M.D.

cc: file

likewise help decrease teenage pregnancy rates.

In summary, I am in favor of parental consent as I feel it would help deter teenage pregnancies; help teens make the wisest choices for themselves and their families; help prevent decisions to have an abortion based upon the shock, fear, and initial panic reactions to pregnancy that teens commonly have; and prevent teenagers from making an uninformed and ill advised decision to undergo a serious medical procedure which can potentially be fatal, or result in life-long medical and/or mental problems. If you have any questions, I can be reached at my work phone number which is (907) 562-2070.

Sincerely,



Ilona J. Rodson Farr, M.D.

LOUIS E. MAYER, M.D., A.P.C.
3300 PROVIDENCE DRIVE, SUITE 301
ANCHORAGE, ALASKA 99508
TELEPHONE (907) 563-3732
FAX (907) 561-4730

LOUIS E. MAYER, M.D., A.P.C.
Diplomate, American Board of Family Practice

CHARLES E. MANWILLER, M.D.
Diplomate, American Board of Family Practice

Senator Loren Leman
Alaska State Capitol Building
Room 115
Juneau, Alaska 99801

February 18, 1997

Dear Senator Leman:

My name is Charles Manwiller, M.D. I have practiced medicine in Anchorage since 1965; I delivered babies until ten years ago. I am a family doctor.

I am writing to state my position on Senate Bill 24. It is my understanding that this bill will facilitate the involvement of parents in the decision of a teenage girl (under age 18) to have an abortion. I am in favor of this legislation, for the following reasons:

1. An abortion is not without potential complications. A girl's parents have a responsibility to know about and approve a procedure which has medical and emotional impact on a minor daughter.


2. Confidentiality between child and parent, though applicable in the arena of sexually transmitted disease, should be waived in abortion. The parents need to know. Abortion involves the destruction of human life. The unborn baby might have infinite value as a future member of the family.

3. I propose that avoidance of parental involvement at this critical time in a teenager's life, while at the moment seemingly less threatening to the pregnant teen, ultimately is more divisive than constructive in the parent-daughter relationship.

4. Medical personnel are quite concerned about obtaining parental consent before treating a minor in almost every situation. Should an event containing the profound significance of an abortion be any less deserving of parental approval?

Thank you for your concern regarding this important family related issue.

Sincerely yours,


Charles E. Manwiller, M.D.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary
committee name -
committee on HB37 Parental Consent dated March 5 1997
bill/subject

Please vote in favor of Parental
Consent before a minor receives
an abortion. We must be
responsible parents, adults &
help our minor population to
understand what an abortion
is & who will die because of it
& what can happen to these ~~minors~~
in future yes if they subject their
bodies to this violent act & kill
their preborn babies.

Signed: Georgia L. Rogers
Testifier
Mr + Mrs Frank a Rogers Sr.
Representing (Optional)
P.O. BX 1022 Sitka Ak 99835
Address
907 747 8303
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the Judiciary
committee name -

committee on HB 37, dated Mar 3-97
bill/subject

Parental Consent before a Minor Receives an Abortion:

Alaskans do need parental consent for a minor before she is able to have an abortion.

We need to strenghten family ties. Parents need to be responsible for the actions of their underage children. This will not happen if ~~the~~ the state takes away one of their ^(parents) rights

In voting for this bill you will make the minor stronger as well as make the parent(s) stronger.

Signed: Margie Hughes
Testifier

Representing (Optional)

Box 912 Sitka AK 99835

Address

(907) 747-3962

Phone No.

03/04/97 LEGISLATIVE TELECONFERENCE NETWORK SYSTEM LTN1401
12:02:12 N CONFERENCE DISPLAY PAGE 01 - ORDER SUMMARY L357
TCN 70376 T/C DATE: 03/05/97 TIME: 13:00 to 16:00 STATUS: 3 ANNOUNCED

SPONSOR: HJUD HOUSE JUDICIARY CHAIRS: GREEN
PURPOSE: PUB PUBLIC-HEARING LEGISLATIVE
1ST ITEM: HB 65 PARTIAL-BIRTH ABORTIONS 2 ITEMS ON AGENDA
CONTACT: LISA KIRSCH TEL: (907)465-4990 MODERATOR: ZZZ
LOCATION STAFF

CHAIRING SITE: JUNEAU CAPITOL ROOM: CAP120 PRINTER: L900
PARTICIPATING LIOs: 10 VOLUNTEER SITES: 1 OFFNETS: 5

SPONSOR REMARKS(PUBLIC): TESTIMONY ALLOWED: Y 2 MINUTE LIMIT:
TESTIMONY WILL BE TAKEN WITH A 2 MINUTE LIMIT.
SEE COMMITTEE SCHEDULE IN BASIS
BACKUP MATERIAL: N

UPDATE NO: 8 ENTERED BY: LHSCJUD LAST UPDATED BY: LIOCLBK
REQUESTED ON: 02/27/97 ON: 02/27/97 ON: 03/04/97

MSG:
ENTER Pg# 02 PF2 NextC# ynnnn PF3 Exit PF4 Menu PF6 Print PF12 Quit

03/04/97 LEGISLATIVE TELECONFERENCE NETWORK LTN1403
12:03:38 N CONFERENCE DISPLAY PAGE 03 - PARTICIPATING LIOs L357
TCN 70376 T/C DATE: 03/05/97 TIME: 13:00 to 16:00 STATUS: 3 ANNOUNCED

* LIO	NAME	ROOM	ADDRESS	ROOM#	MODERATOR
	ANC ANCHORAGE	716 W 4TH, #200	ZZZ	ZZZ	LOCATION STAFF
	DJT DELTA JCT.	JARVIS CTR. #210	ZZZ	ZZZ	LOCATION STAFF
	FBX FAIREBANKS	119 N CUSHMAN ST	ZZZ	ZZZ	LOCATION STAFF
	GLN GLENNALLEN	COMMUNITY LIB.	ZZZ	ZZZ	LOCATION STAFF
*	JNU JUNEAU	CAPITOL	CAP120	ZZZ	LOCATION STAFF
	KEN KENAI LIO	145 MAIN ST LOOP	ZZZ	ZZZ	LOCATION STAFF
	MAT MATSU	600 E RAILROAD	ZZZ	ZZZ	LOCATION STAFF
	PSG PETERSBURG	101 GJOA STREET	ZZZ	ZZZ	LOCATION STAFF
	SIT SITKA	210 LAKE STREET	ZZZ	ZZZ	LOCATION STAFF
	TOK TOK	MP 1314 AK. HWY	ZZZ	ZZZ	LOCATION STAFF

MSG: 1410 NO FURTHER INFORMATION
ENTER Pg# 04 PF2 NextC# ynnnn PF3 Exit PF4 Menu PF5 Update PF7 Bwd PF8 Fwd

03/04/97

LEGISLATIVE TELECONFERENCE NETWORK

LTN1404

12:04:15 N

CONFERENCE DISPLAY PAGE 04 - VOLUNTEER & OFF-NET SITES

L357

TCN 70376

T/C DATE: 03/05/97

TIME: 13:00 to 16:00

STATUS: 3 ANNOUNCED

* LIO VTS	NAME	ADDRESS	CONTACT	TELEPHONE
DLG NAK	NAKNEK	NAKNEK	ZZZ ELIZABET ANGALAK	907 246 4465
ZZZ OF1	OFFNET 1	CHICAGO, IL	JUDITH KOHLER	312 786 9494
ZZZ OF2	OFFNET 2	NEW YORK	JANET CREPPS	212 514 5534
ZZZ OF3	OFFNET 3	ANCHORAGE	CYNTHIA BROOKE	907 563 8588
ZZZ OF4	OFFNET 4	ANCHORAGE	JAN WHITEFIELD	907 563 7228
ZZZ OF5	OFFNET 5	ANCHORAGE	SHERRY RICHEY	907 272 6772

MSG: 1410 NO FURTHER INFORMATION

ENTER Pg# 05 PF2 NextC# ynnnn PF3 Exit PF4 Menu PF5 Update PF7 Bwd PF8 Fwd

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4th Avenue at K Street • Anchorage, Alaska 99501 • (907) 276-6000

Handwritten notes:
 PPV Danforth 428 0552
 PPV Legacy 505 05 833
 200 v Madco 910 05 113

Alaska State Legislature

REPRESENTATIVE
PETER KELLY

Mailing Address:
119 N. Cushman, Suite 203
Fairbanks, Alaska 99701
(907) 456-8161

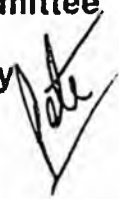


While in Juneau
State Capitol
Juneau, Alaska
99801-1182
(907) 465-2327

House District 31

House Of Representatives

TO: Representative Jeannette James, Chair
House State Affairs Committee

FROM: Representative Pete Kelly 

DATE: January 23, 1997

RE: CS for HB 37



HB 37 lowers the age for which consent is required from 18 to 16. I would like the State Affairs Committee to offer the attached CS ammending HB 37 to require consent for minors under the age of 18. This will change our bill to match SB 24 sponsored by Senator Leman.

0-LS0227E
Lauterbach
1/21/97

CS FOR HOUSE BILL NO. 37()
IN THE LEGISLATURE OF THE STATE OF ALASKA
TWENTIETH LEGISLATURE - FIRST SESSION

BY

Offered:
Referred:

Sponsor(s): REPRESENTATIVES KELLY, KOHRING, VEZEY, AND MULDER, Ogan, Dyson, Martin

A BILL
FOR AN ACT ENTITLED

1 "An Act relating to a requirement that a parent, guardian, or custodian consent
2 before certain minors receive an abortion; establishing a judicial bypass procedure
3 by which a minor may petition a court for authorization to consent to an
4 abortion without consent of a parent, guardian, or custodian; amending the
5 definition of 'abortion'; and amending Rules 40 and 79, Alaska Rules of Civil
6 Procedure; Rules 204, 210, 212, 213, 508, and 512.5, Alaska Rules of Appellate
7 Procedure; and Rule 9, Alaska Administrative Rules."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

- 9 * Section 1. PURPOSE; FINDINGS. (a) It is the intent of the legislature in enacting this
10 Act to further the important and compelling state interests of
11 (1) protecting minors against their own immaturity;
12 (2) fostering the family structure and preserving it as a viable social unit;

1 (3) protecting the rights of parents to rear children who are members of their
2 household; and

3 (4) protecting the health of minor women.

4 (b) The legislature finds that

5 (1) immature minors often lack the ability to make fully informed choices that
6 take account of both immediate and long-range consequences;

7 (2) the physical, emotional, and psychological consequences of abortion are
8 serious and can be lasting particularly when the patient is immature;

9 (3) the capacity to become pregnant and the capacity for mature judgment
10 concerning the wisdom of an abortion are not necessarily related;

11 (4) parents ordinarily possess information essential to a physician's or surgeon's
12 best medical judgment concerning the child;

13 (5) parents who are aware that their minor daughter has had an abortion may
14 better ensure that the daughter receives adequate medical attention after the abortion;

15 (6) parental consultation is usually desirable and in the best interest of the
16 minor; and

17 (7) parental involvement legislation enacted in other states has shown to have
18 a significant effect in reducing abortion, birth, and pregnancy rates among minors.

19 * Sec. 2. AS 18.16.010(a) is amended to read:

20 (a) An abortion may not be performed in this state unless

21 (1) the abortion is performed by a physician or surgeon licensed by the
22 State Medical Board under AS 08.64.200;

23 (2) the abortion is performed in a hospital or other facility approved for
24 the purpose by the Department of Health and Social Services or a hospital operated by
25 the federal government or an agency of the federal government;

26 (3) before an abortion is knowingly performed on an unmarried,
27 unemancipated woman under 18 years of age, consent has been given as required
28 under AS 18.16.020 or a court has authorized the minor to consent to the abortion
29 under AS 18.16.030 and the minor consents; for purposes of enforcing this
30 paragraph, there is a rebuttable presumption that a woman who is unmarried and
31 under 18 years of age is unemancipated [CONSENT HAS BEEN RECEIVED

1 FROM THE PARENT OR GUARDIAN OF AN UNMARRIED WOMAN LESS
2 THAN 18 YEARS OF AGE]; and

3 (4) the woman is domiciled or physically present in the state for 30
4 days before the abortion.

5 * Sec. 3. AS 18.16.010 is amended by adding new subsections to read:

6 (e) A person who performs or induces an abortion in violation of (a)(3) of this
7 section is civilly liable to the pregnant woman and the woman's parents, guardian, or
8 custodian for compensatory and punitive damages.

9 (f) It is an affirmative defense to a prosecution or claim for a violation of
10 (a)(3) of this section that the pregnant woman provided the person who performed or
11 induced the abortion with false, misleading, or incorrect information about the
12 woman's age, marital status, or emancipation, and the person who performed or
13 induced the abortion did not otherwise have reasonable cause to believe that the
14 pregnant woman was under 18 years of age, unmarried, or unemancipated.

15 (g) It is an affirmative defense to a prosecution or claim for violation of (a)(3)
16 of this section that compliance with the requirements of (a)(3) of this section was not
17 possible because an immediate threat of serious risk to the life or physical health of
18 the pregnant woman from the continuation of the pregnancy created a medical
19 emergency necessitating the immediate performance or inducement of an abortion. In
20 this subsection, "medical emergency" means a condition that, on the basis of the
21 physician's or surgeon's good faith clinical judgment, so complicates the medical
22 condition of a pregnant woman that

23 (1) an immediate abortion of the woman's pregnancy is necessary to
24 avert the woman's death; or

25 (2) a delay in providing an abortion will create serious risk of
26 substantial and irreversible impairment of a major bodily function of the pregnant
27 woman.

28 * Sec. 4. AS 18.16 is amended by adding new sections to read:

29 **Sec. 18.16.020. Consent required before minor's abortion.** A person may
30 not knowingly perform or induce an abortion upon a woman who is known to the
31 person to be pregnant, unmarried, under 18 years of age, and unemancipated unless,

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before the abortion, at least one of the following applies:

(1) one of the woman's parents or the woman's guardian or custodian has consented in writing to the performance or inducement of the abortion;

(2) a court issues an order under AS 18.16.030 authorizing the woman to consent to the abortion without consent of a parent, guardian, or custodian and the woman consents to the abortion; or

(3) a court, by its inaction under AS 18.16.030, constructively has authorized the woman to consent to the abortion without consent of a parent, guardian, or custodian and the woman consents to the abortion.

Sec. 18.16.030. Judicial bypass for minor seeking an abortion. (a) A woman who is pregnant, unmarried, under 18 years of age, and unemancipated who wishes to have an abortion without the consent of a parent, guardian, or custodian may file a complaint in the superior court requesting the issuance of an order authorizing the woman to consent to the performance or inducement of an abortion without the consent of a parent, guardian, or custodian.

(b) The complaint shall be made under oath and must include all of the following:

(1) a statement that the complainant is pregnant;

(2) a statement that the complainant is unmarried, under 18 years of age, and unemancipated;

(3) a statement that the complainant wishes to have an abortion without the consent of a parent, guardian, or custodian;

(4) an allegation of either or both of the following:

(A) that the complainant is sufficiently mature and well enough informed to decide intelligently whether to have an abortion without the consent of a parent, guardian, or custodian; or

(B) that one or both of the woman's parents or the woman's guardian or custodian was engaged in a pattern of physical, sexual, or emotional abuse against the woman, or that the consent of a parent, guardian, or custodian otherwise is not in the woman's best interest;

(5) a statement as to whether the complainant has retained an attorney

1 and, if an attorney has been retained, the name, address, and telephone number of the
2 attorney.

3 (c) The court shall fix a time for a hearing on any complaint filed under (a)
4 of this section and shall keep a record of all testimony and other oral proceedings in
5 the action. The hearing shall be held at the earliest possible time, but not later than
6 the fifth business day after the day that the complaint is filed. The court shall enter
7 judgment on the complaint immediately after the hearing is concluded. If the hearing
8 required by this subsection is not held by the fifth business day after the complaint
9 is filed, the failure to hold the hearing shall be considered to be a constructive order
10 of the court authorizing the complainant to consent to the performance or inducement
11 of an abortion without the consent of a parent, guardian, or custodian, and the
12 complainant and any other person may rely on the constructive order to the same
13 extent as if the court actually had issued an order under this section authorizing the
14 complainant to consent to the performance or inducement of an abortion without such
15 consent.

16 (d) If the complainant has not retained an attorney, the court shall appoint an
17 attorney to represent the complainant.

18 (e) If the complainant makes only the allegation set out in (b)(4)(A) of this
19 section and if the court finds by clear and convincing evidence that the complainant
20 is sufficiently mature and well enough informed to decide intelligently whether to have
21 an abortion, the court shall issue an order authorizing the complainant to consent to
22 the performance or inducement of an abortion without the consent of a parent,
23 guardian, or custodian. If the court does not make the finding specified in this
24 subsection, it shall dismiss the complaint.

25 (f) If the complainant makes only the allegation set out in (b)(4)(B) of this
26 section and the court finds by clear and convincing evidence that there is evidence of
27 a pattern of physical, sexual, or emotional abuse of the complainant by one or both of
28 the woman's parents or the woman's guardian or custodian, or that the consent of the
29 parents, guardian, or custodian of the complainant otherwise is not in the best interest
30 of the complainant, the court shall issue an order authorizing the complainant to
31 consent to the performance or inducement of an abortion without the consent of a

1 parent, guardian, or custodian. If the court does not make the finding specified in this
2 subsection, it shall dismiss the complaint.

3 (g) If the complainant makes both of the allegations set out in (b)(4) of this
4 section, the court shall proceed as follows:

5 (1) the court first shall determine whether it can make the finding
6 specified in (e) of this section and, if so, shall issue an order under that subsection; if
7 the court issues an order under this paragraph, it may not proceed under (f) of this
8 section; if the court does not make the finding specified in (e) of this section, it shall
9 proceed under (2) of this subsection;

10 (2) if the court under (1) of this subsection does not make the finding
11 specified in (e) of this section, it shall proceed to determine whether it can make the
12 finding specified in (f) of this section and, if so, shall issue an order under that
13 subsection; if the court does not make the finding specified in (f) of this section, it
14 shall dismiss the complaint.

15 (h) The court may not notify the parents, guardian, or custodian of the
16 complainant that the complainant is pregnant or wants to have an abortion.

17 (i) If the court dismisses the complaint, the complainant has the right to appeal
18 the decision to the supreme court, and the superior court immediately shall notify the
19 complainant that there is a right to appeal.

20 (j) If the complainant files a notice of appeal authorized under this section, the
21 superior court shall deliver a copy of the notice of appeal and the record on appeal to
22 the supreme court within four days after the notice of appeal is filed. Upon receipt of
23 the notice and record, the clerk of the supreme court shall place the appeal on the
24 docket. The appellant shall file a brief within four days after the appeal is docketed.
25 Unless the appellant waives the right to oral argument, the supreme court shall hear
26 oral argument within five days after the appeal is docketed. The supreme court shall
27 enter judgment in the appeal immediately after the oral argument or, if oral argument
28 has been waived, within five days after the appeal is docketed. Upon motion of the
29 appellant and for good cause shown, the supreme court may shorten or extend the
30 maximum times set out in this subsection. However, in any case, if judgment is not
31 entered within five days after the appeal is docketed, the failure to enter the judgment

1 shall be considered to be a constructive order of the court authorizing the appellant to
2 consent to the performance or inducement of an abortion without the consent of a
3 parent, guardian, or custodian, and the appellant and any other person may rely on the
4 constructive order to the same extent as if the court actually had entered a judgment
5 under this subsection authorizing the appellant to consent to the performance or
6 inducement of an abortion without consent of another person. In the interest of justice,
7 the supreme court, in an appeal under this subsection, shall liberally modify or
8 dispense with the formal requirements that normally apply as to the contents and form
9 of an appellant's brief.

10 (k) Each hearing under this section, and all proceedings under (j) of this
11 section, shall be conducted in a manner that will preserve the anonymity of the
12 complainant. The complaint and all other papers and records that pertain to an action
13 commenced under this section, including papers and records that pertain to an appeal
14 under this section, shall be kept confidential and are not public records under
15 AS 09.25.110 - 09.25.120.

16 (l) The supreme court shall prescribe complaint and notice of appeal forms that
17 shall be used by a complainant filing a complaint or appeal under this section. The
18 clerk of each superior court shall furnish blank copies of the forms, without charge,
19 to any person who requests them.

20 (m) A filing fee may not be required of, and court costs may not be assessed
21 against, a complainant filing a complaint under this section or an appellant filing an
22 appeal under this section.

23 **Sec. 18.16.090. Definitions.** In this chapter,

24 (1) "abortion" means the use or prescription of an instrument, medicine,
25 drug, or other substance or device to terminate the pregnancy of a woman known to
26 be pregnant, except that "abortion" does not include the termination of a pregnancy if
27 done with the intent to

28 (A) save the life or preserve the health of the unborn child;

29 (B) deliver the unborn child prematurely to preserve the health
30 of both the pregnant woman and the woman's child; or

31 (C) remove a dead unborn child;

1 (2) "unemancipated" means that a woman who is unmarried and under
2 18 years of age has not done any of the following:

3 (A) entered the armed services of the United States;

4 (B) become employed and self-subsisting;

5 (C) been emancipated under AS 09.55.590; or

6 (D) otherwise become independent from the care and control of

7 the woman's parent, guardian, or custodian.

8 * Sec. 5. AS 44.21.410(a) is amended to read:

9 (a) The office of public advocacy shall

10 (1) perform the duties of the public guardian under AS 13.26.360 -
11 13.26.410;

12 (2) provide visitors and experts in guardianship proceedings under
13 AS 13.26.131;

14 (3) provide guardian ad litem services to children in child protection
15 actions under AS 47.17.030(e) and to wards and respondents in guardianship
16 proceedings who will suffer financial hardship or become dependent upon a
17 government agency or a private person or agency if the services are not provided at
18 state expense under AS 13.26.112;

19 (4) provide legal representation in cases involving judicial bypass
20 procedures for minors seeking abortions under AS 18.16.030, in guardianship
21 proceedings to respondents who are financially unable to employ attorneys under
22 AS 13.26.106(b), to indigent parties in cases involving child custody in which the
23 opposing party is represented by counsel provided by a public agency, to indigent
24 parents or guardians of a minor respondent in a commitment proceeding concerning
25 the minor under AS 47.30.775;

26 (5) provide legal representation and guardian ad litem services under
27 AS 25.24.310; in cases arising under AS 47.15 (Uniform Interstate Compact on
28 Juveniles); in cases involving petitions to adopt a minor under AS 25.23.125(b) or
29 petitions for the termination of parental rights on grounds set out in
30 AS 25.23.180(c)(3); in cases involving petitions to remove the disabilities of a minor
31 under AS 09.55.590; in children's proceedings under AS 47.10.050(a) or under

1 AS 47.12.090; in cases involving appointments under AS 18.66.100(a) in petitions for
2 protective orders on behalf of a minor; and in cases involving indigent persons who
3 are entitled to representation under AS 18.85.100 and who cannot be represented by
4 the public defender agency because of a conflict of interests;

5 (6) develop and coordinate a program to recruit, select, train, assign,
6 and supervise volunteer guardians ad litem from local communities to aid in delivering
7 services in cases in which the office of public advocacy is appointed as guardian ad
8 litem;

9 (7) provide guardian ad litem services in proceedings under
10 AS 12.45.046;

11 (8) establish a fee schedule and collect fees for services provided by
12 the office, except as provided in AS 18.85.120 or when imposition or collection of a
13 fee is not in the public interest as defined under regulations adopted by the
14 commissioner of administration;

15 (9) provide visitors and guardians ad litem in proceedings under
16 AS 47.30.839;

17 (10) provide legal representation to indigent parents under
18 AS 14.30.195(e).

19 * Sec. 6. AS 18.16.010(d) is repealed.

20 * Sec. 7. AS 18.16.030(c), added by sec. 4 of this Act, has the effect of amending Rule
21 40, Alaska Rules of Civil Procedure, by setting a specific timetable for hearing certain cases.

22 * Sec. 8. AS 18.16.030(j), added by sec. 4 of this Act, has the effect of amending Rules
23 204, 210, 212, and 213, Alaska Rules of Appellate Procedure, by establishing specific time
24 limits applicable to certain appeals and by instructing the supreme court to modify or dispense
25 with formal requirements applicable to certain briefs.

26 * Sec. 9. AS 18.16.030(k), added by sec. 4 of this Act, has the effect of amending Rule
27 512.5, Alaska Rules of Appellate Procedure, by making certain appellate records and papers
28 confidential.

29 * Sec. 10. AS 18.16.030(m), added by sec. 4 of this Act, has the effect of amending Rule
30 9, Alaska Administrative Rules, Rule 79, Alaska Rules of Civil Procedure, and Rule 508,
31 Alaska Rules of Appellate Procedure, by prohibiting filing fees and assessment of court costs

1 in certain actions.

February 19, 1997

Kimberly Miller
3320 Nowell Ave., Apt. 4
Juneau, AK 99801
586-1569

Representative Joseph Green
State Capitol Rm. 118
Juneau, AK 99801

Dear Representative Green:

I am writing to express my strong opposition to HB 37 regarding requiring parental consent for minors seeking an abortion. I feel that HB 37 is an attempt to end safe and legal abortions by erecting insurmountable barriers for young women. The argument that HB 37 would enhance teen-parent communication is inaccurate. The following is a list of reasons why I am adamantly opposed to HB 37:

* Studies have shown that nationally the majority (61%) of minors who have abortions do so with at least the knowledge of one parent. The younger the minor the more likely she is to voluntarily discuss the abortion with a parent. The study looked at states without parental consent laws.

* Studies have shown that parental consent laws do not encourage young women to tell their parents. The minority of minors who do not tell their parents come from families where communication is difficult or dangerous due to a variety of circumstances. The belief that telling their parents would result in further abuse, family violence or increased drug/alcohol use for example is real. Thus, HB 37 would act to further victimize these young women.

* The judicial bypass process is not an adequate safety valve for these young women. The judicial process can be a fearful, anxiety and shame producing experience where a young woman who is already in a vulnerable and difficult situation is subjected to further barriers in finding a resolution to her situation. The judicial system is not an appropriate venue for this type of decision to be made.

* Minors in rural Alaska will have to maneuver additional obstacles to receive a safe and legal abortion if HB 37 is enacted. If the young woman's situation was such that she could not tell her parents she would be forced to go to a local judge who more that likely knows her to seek a judicial bypass. The process, coupled with the fact that she already has to travel to a strange place to receive an abortion, makes young women in rural communities even more penalized by HB 37.

The net effect of HB 37 will be to chip away at women's legal right for a safe abortion. After enacting a parental consent law in Minnesota the state had a 18% increase in second-trimester abortions among minors, and the birth rate in Minneapolis for 15-17 year olds increased by 38.4%. These statistics show how detrimental HB 37 will be for Alaskan's. I urge you to take Alaska in a safe, healthy and positive direction rather than cause more hardship for Alaska's children and families.

Thank you,
Kimberly Miller, MSW

February 16, 1997

**Senator Joe Green
Chair, House Judiciary
Capitol Bldg
Juneau AK 99811**

Dear Representative Green and Members of House Judiciary Committee:

I am a voter in House District 26, Senate District M. I am writing this letter to let you know that I am opposed to CSHE37 concerning parental consent for abortion for girls under the age of 18. My reasons are listed below.

1) Apparently the legislature hopes this bill will compel family communication and reduce the numbers of teen pregnancy and abortion. However, statistics from other states make it clear that this type legislation will likely serve no such purpose.

I obtained some information from Planned Parenthood and learned that in Michigan a similar law was passed and the teen pregnancy rates actually increased by over 5%.

As for teen abortion rates, when a similar law was passed in Missouri, the girls went to Kansas to get their abortions. The abortion rate in Kansas rose 62%.

In Massachusetts, after a similar law was passed, the pregnant teens went to another state. During the first month of this Massachusetts law, the number of teens who left the state increased by 300%. Eight months after this law went into effect, Massachusetts teens traveled at an average of 91 a month.

In several states including New York, Missouri and Minnesota, there was a substantial increase (close to 1/3 of the cases) in late (which of course are more dangerous) abortions for teens.

2) This bill will obviously cause a cost burden and case-load burden to the courts. There will be a need to monitor the time lines for the cases and to provide an attorney in most, if not all, cases. I understand there is a fiscal

Chairman Green

Page 2

note with this bill, but I wonder if it will be large enough to cover the costs involved. I keep hearing that the courts are already overburdened with case-load and I wonder what the overall fiscal impact really is. I also wonder if this legislation will effect other peoples rights to a speedy trial.

3) I think this legislation is unnecessary particularly in light of the information provided by the Chicago Attorney, Ms Kohler (spell?) that was presented at the February 11th SA hearing on this matter. She stated that only a very small number of girls who petitioned the court for abortion without consent were denied (I recall it was around 69 out of over 3,600 — I'm not exactly sure of the numbers, but this is close). The rest of them were successful in their petition. It seems that the court expenses involved here are not worth the trouble.

It is also my understanding that the greater majority of young girls in this state already obtain parental consent before they abort a fetus anyway.

This legislation appears to attempt to get teenagers to talk to their parents and this should be handled through good parenting skills that would include dialog about sex before marriage.

4) We have all heard stories about how some girls would literally rather die than to tell their parents they are pregnant and many of them do through suicide and self abortion or they arrange illegal life-threatening abortions performed by incompetent people.

There must be a provision included in this bill to assure protection of the girls who reluctantly come forward to their parents. There should also be some assurance that girls who are emancipated by their parents as a result of the pregnancy or the request for abortion are able to obtain some type of public assistance to assure their survival.

5) The legislation places the entire burden of the episode directly on the shoulders and minds of the girls and their families and the males apparently do not have to take any responsibility for impregnating them.

Chairman Green

Page 3

The boy involved must also be required to notify his parents, and he and his parents must take responsibility (including financial responsibility) in the matter. Keeping in mind, of course, the ultimate decision lies with the one whose body it is that is carrying the fetus.

6) Our bodies are our own and each person should be able to make decisions (especially medical decisions) on his or her own.

7) Shades of discrimination creep up in this bill. Not only toward the female population but perhaps Alaskan Natives and others who live in rural areas and are unable to obtain court petitions and assistance that we enjoy in the larger cities.

In closing, I am sure there are a number of other issues that I have not addressed such as the impact on the medical community, school officials, individual rights of privacy, etc., but I hope the information I have provided will encourage you to withdraw this legislation from the process.

I very much appreciate your consideration of my views on this important legislation.

Sincerely,



Sue Doggett

PO Box 190808

Anchorage AK 99519-0808

Tel 248-3402 * fax 248-4068



Alaska State Legislature

Please enter into the record my testimony to the House State Affairs
 committee name
 committee on HB 37, dated Feb. 11, 1997
 bill/subject

2/10/97

Parental consent laws endanger teens' lives. We would all like to live in a world where all children could freely consult with their parents about what is happening in their lives. However, it is a fact that some teens live in dangerous situations, they justifiably fear abuse, neglect, death and other horrific scenarios if they had to admit to their parents that they were pregnant and choosing a legal procedure to terminate their pregnancy.

Fortunately, parents have thousands of opportunities to open communication with their teenagers, and to show them that they can be trusted, empathetic and supportive as parents. This is the kind of family communication that, for many, prevents the need for abortion in the first place. This is where the communication ought to happen; communication should not be legislated into the lives of families by laws like parental consent.

Sincerely,

Diana J. Kushner, Sitka Alaska

Signed: Diana Kushner
 Testifier

3
 Representing (Optional)
1830 Edgumbe Dr. Sitka 99835
 Address
907-747-7851
 Phone No.

Juneau Coalition



for Pro-Choice

February 8, 1997

Dear Members of the House State Affairs Committee:

The Juneau Coalition for Pro-Choice (JCPC) would like to go on record opposing the passage of HB 37 which would restrict a young woman's ability to act on her Constitutionally protected right to choose. JCPC strongly encourages all young women who become pregnant, and the putative fathers, to discuss options with their parents if they are able, but such communication cannot be achieved through passage of this bill. The majority of young women who do not involve their parents in making decisions about a pregnancy have problems with their family which precludes discussion about the issue. HB 37 only serves to put minors at risk.

Judicial bypass procedures are not the answer either, as this option is intimidating to a young woman and only results in delay which makes an abortion riskier if the minor gets approval from the judge for an abortion. As an appellate court in California stated "the judicial bypass procedure creates a substantial obstacle whose only effect is to hinder the minor from obtaining an abortion. Whether a minor is capable or giving informed consent to undergo an abortion is a question which can be more easily decided by a physician than a judge." The judicial bypass is particularly unworkable in Alaska where rural communities may not have access to a court, resulting in a law that unreasonably impacts rural Alaskans.

HB 37 does not protect young women who are at risk from physical or emotional abuse by their parents and unconstitutionally restricts a young woman's right to choose to terminate a pregnancy.

Sincerely,

Shannon O'Fallon
President
Juneau Coalition for Pro-Choice

Robert G. Thompson, M.D., F.A.C.O.G.

Reproductive Surgeon - Society of Reproductive Surgeons
Diplomate - American Board of Obstetrics and Gynecology

FAX: (907) 465-3973

Catherine A. Thompson, R.N., M.S.N.

Advanced Nurse Practitioner

February 18, 1997

The Honorable Loren Leman
Senator - State of Alaska
Juneau, Alaska 99811

ATTENTION: Mike Pauley

Re: Written Testimony
SB 24 and HB 37

Dear Senator Leman and Judiciary Committee Members:

My name is Robert Thompson. I am a physician and surgeon specializing in obstetrics, gynecology, infertility, and reproductive surgery. I've read numerous other testimonies of other physicians, colleges, societies, and organizations regarding the issue of parental consent for minors before proceeding with an elective surgical procedure, in this case, as an "abortion." There seems to be three major objections physicians and various organizations have in regards to accepting this bill.

First, the legal obligations and consequences of violating this obligation. Being a practicing physician does not exempt physicians of the numerous and extensive responsibilities to the law and the numerous consequences for violations to such responsibility within the practice of medicine. Any argument with regards to criminalization versus aspects of practicing medicine need only to be considered in this light. It is difficult for me to understand why a surgical procedure such as abortion could have ever come to be considered an exempt procedure for parental consent when its consequences can include significant life-threatening and permanent complications which could include death, sterility, infection, and psychological difficulties. While those complications are usually considered to be fairly rare, they exist. The treatment of complications after an abortion is completed would also require parental consent, therefore, I feel it is in the best interest of a physician practicing medicine to involve a responsible guardian or parent in the consent for this surgical procedure.

The second objection involves physician concerns about breach of confidentiality. Again, this is an exceedingly weak argument and continues to be so in all levels of the practice of medicine. It remains the patient's (that is the teenager) responsibility to inform and involve the parents with regards to the diagnosis and treatment of this medical problem.



Senator Loman et al:
February 18, 1997
Page Two

As a loving father, I cannot imagine not being able to be there to support and help with my daughter's decisions in this regard. While I recognize that this is not the attitude that all parents take, I have to believe it is the ideal and standard with which society should expect from parents, not an attitude of judgement.

In summary, in no place in this bill does the confidentiality of the physician/patient relationship necessarily have to be abridged by the physician. It remains the minor(s) responsibility to be involved with the parent(s) or legal guardian and the court when such a decision regarding this surgical procedure is deemed necessary.

Finally, the question which has not been completely considered is that of "informed consent." The courts have consistently upheld the right of the parents to be responsible for medical care and decisions regarding their minor child(ren) with regards to surgical procedures. In a large manner, this may be considered to be contributed to by the ability of adults to help assure adequate, informed decisionmaking. Part of becoming an adult is learning to accept the consequences of our decisions. Part of being a parent is to allow our child(ren) to begin to make decisions and to learn to accept the consequences and responsibility for those decisions. Hopefully, this bill will stand on its own merit, continuing to re-inject a balance of responsibility on physicians and parents with regards to the impact of sexuality and teenage pregnancy on our society and to begin to respond accordingly.

I hope this information is helpful and encouraging to the adoption of this bill on the simple premise that parental guidance is desirable in our society.

Very truly yours,



Robert G. Thompson, M.D., FACOG
Reproductive Surgeon

P.S. I've left out all the statistics.

Alaska State Legislature

REPRESENTATIVE
PETER KELLY

Mailing Address:
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Fairbanks, Alaska 99701
(907) 456-8161

While in Juneau
State Capitol
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House District 31

House Of Representatives

MEMORANDUM

TO: House Judiciary Committee
FROM: Representative Pete Kelly *Pete*
DATE: 6 March 1997
RE: House Bill 37
Minnesota Statistics

There was some confusion about the quoted statistics of parental involvement laws at yesterday's hearing. I have attached some additional information.

When Minnesota's parental notice law was in effect from 1981 to 1986, the pregnancy rate for teens 17 and under declined 20.5 percent. In addition, the pregnancy rate for teens age 18 and 19 declined by 25.4 percent during the same period. However, the pregnancy rates in *both* categories substantially *increased* between 1975 and 1980, the five years *preceding* enactment of the law.

The source of this data is the Minnesota Department of Health. This data was analyzed in a 1991 article in the American Journal of Public Health. The authors concluded:

These data suggest that parental notification facilitated pregnancy avoidance in 15-17 year-old Minnesota women. Abortion rates declined unexpectedly while birth rates continued to decline in accordance with a long-term trend.

Angela Salerno alluded to an 18 percent increase in second-trimester abortions in Minnesota. I do not know the source of her statistic but cannot find it anywhere else. I have attached a chart from the American Journal of Public Health including the abortion rate, early abortion rate and late abortion rate for the state of Minnesota.

You will find that there was an overall decrease in the rate of second-trimester abortions.

The final statistic that was tossed around was a reference by Angela Salerno and Alice Johnstone that under the Minnesota notification statute, the birth rate for 15-17 year-olds in Minneapolis rose 38.4 percent. This statistic is addressed in the Hodgson v. Minnesota case. The teenage population of Minneapolis makes up only 6 percent of the teenagers in Minnesota and it was shown that the increase in birth rate was unique to Minneapolis and did not occur in Minnesota in general. Further, it was found that the increase in birth for these teens was confined to the minority population, specifically the Asian-Pacific. I have attached these findings.

I would like to remind committee members, however, that we are not debating statistics. The issue at hand is still parental rights and these statistics just serve to reinforce the need for this legislation.

Impact of the Minnesota Parental Notification Law on Abortion and Birth

James L. Rogers, PhD, Robert F. Boruch, PhD, George B. Stoms, BA, and Dorothy DeMoya, DNSc

The pre-enactment to post-enactment increase in the proportion of late (>12 weeks) to early (\leq 12 weeks) abortions was greater for 15-17 than for 20-44 year-old women. At least two hypotheses may explain this finding. First, the law may have been more successful in preventing pregnancy among minors who would have had early abortions than among minors who would have had late abortions. A second possibility is that the law caused delays for a greater percentage of a declining number of minors seeking abortions. Regardless, the claim that the law caused more minors to obtain late abortions is unsubstantiated. In fact, the reverse is true. For ages 15-17 the number of late abortions per 1,000 women decreased following the enactment of the law. Therefore, an increased medical hazard due to a rising number of late abortions was not realized.

TABLE 1—Outcome Measures and Population Estimates for Minnesota Women, 1978 to 1987*

Outcome Measure	Age (years)	1978	1978	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987
Abortion Rate [†]	15-17	12.36	16.50	18.60	16.25	19.24	19.57	16.06	14.25	12.90	13.00	14.54	14.42	15.46
	18-19	20.47	28.92	31.27	35.71	38.72	40.26	38.37	36.45	33.08	36.05	34.07	31.99	30.83
	20-44	7.32	9.55	11.48	12.36	13.41	14.13	14.00	13.98	13.11	14.21	14.48	14.29	14.17
Birth Rate [†]	15-17	20.94	19.64	19.62	17.90	17.71	17.48	17.36	18.54	14.58	16.00	15.01	15.52	15.03
	18-19	56.11	52.98	55.10	55.80	57.00	59.48	59.33	58.57	48.78	48.85	47.18	42.65	43.68
	20-44	74.02	72.48	75.79	78.14	78.06	78.80	79.43	78.13	75.18	75.57	75.92	74.00	72.67
Abortions/Births	15-17	0.59	0.84	0.96	1.03	1.09	1.12	0.93	0.96	0.88	0.81	0.97	0.93	1.03
	18-19	0.36	0.55	0.57	0.64	0.68	0.68	0.65	0.64	0.69	0.72	0.72	0.76	0.71
	20-44	0.10	0.13	0.15	0.16	0.17	0.18	0.18	0.18	0.17	0.19	0.19	0.19	0.19
Early Abortion Rate [†]	15-17	10.22	12.81	14.73	14.97	15.73	15.34	12.98	11.37	9.66	9.68	11.24	11.38	12.63
	18-19	17.81	24.01	25.89	30.46	33.31	33.58	32.58	30.92	27.63	28.42	28.13	28.04	26.23
	20-44	6.82	8.45	10.23	11.24	12.19	12.71	12.74	12.65	11.57	12.69	13.04	12.85	12.84
Late Abortion Rate [†]	15-17	2.16	3.69	3.68	3.26	3.51	4.23	3.13	2.89	2.94	3.36	3.30	3.04	2.80
	18-19	2.65	4.91	5.39	5.25	5.41	6.69	5.78	5.63	5.44	6.63	5.94	5.85	4.68
	20-44	0.70	1.10	1.25	1.11	1.23	1.42	1.27	1.31	1.24	1.53	1.44	1.44	1.31
Late/Early Abortions	15-17	0.21	0.29	0.26	0.22	0.22	0.28	0.24	0.25	0.30	0.36	0.29	0.27	0.22
	18-19	0.16	0.20	0.21	0.17	0.16	0.20	0.18	0.15	0.20	0.23	0.21	0.22	0.17
	20-44	0.11	0.13	0.12	0.10	0.10	0.11	0.10	0.10	0.10	0.12	0.11	0.11	0.10
Population	15-17	115884	117102	116317	115722	115282	113600	108143	103981	104371	100131	100912	101172	101648
	18-19	85899	86828	86110	85525	85047	83964	79863	76766	77004	73784	74296	74376	74766
	20-44	682309	683069	700327	722162	747058	781209	779081	797136	799912	811683	819042	821954	828167

*Raw data provided by the Minnesota Center for Health Statistics.

[†]Abortion, birth, early abortion and late abortion rates are expressed as the number of abortions or births per 1000 women.

NOTE: Early abortions: ≤12 weeks; Late abortions: >12 weeks.

IN THE
Supreme Court of the United States
OCTOBER TERM, 1989

JANE HODGSON, M.D., *et al.*,
Petitioners, Cross-Respondents,

v.

STATE OF MINNESOTA, *et al.*,
Respondents, Cross-Petitioners.

On Writ of Certiorari to the United States Court of Appeals
for the Eighth Circuit

BRIEF OF THE ASSOCIATION OF
AMERICAN PHYSICIANS AND SURGEONS (AAPS)
AS *AMICUS CURIAE* IN SUPPORT OF
STATE OF MINNESOTA

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October 10, 1989

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III. THE CONTENTION THAT THE NOTICE LAW INCREASED BIRTHS TO TEENS IS BASED ON STATISTICS FOR ONLY THE LIMITED AREA OF THE MINNEAPOLIS CITY LIMITS AND THESE MUST BE VIEWED WITHIN THE CONTEXT OF OTHER DEMOGRAPHIC PHENOMENA IN MINNEAPOLIS AND THROUGHOUT THE STATE.

The plaintiff clinics claim that the notice law caused a 38.4% increase in the birth rate to teens age 16-17 by relying on a 38.4% increase in the birth rate for teens age 15-17 in Minneapolis between 1980-84. Pet.Br. at 12. Plaintiffs, purporting to quote Edward Ehlinger of the Minneapolis Dept. of Health, argue that the notice law "was the only factor that uniquely affected the fifteen to seventeen year old age group which could explain the difference." Pet.Br. at 12. Ehlinger, in fact, did not say that it was the "only" factor; he said merely that it "would be an important factor." T. 2030-31.

As this Court stated recently in *Webster v. Reproductive Health Services, Inc.*, 109 S.Ct. 3040, 3050 (1989), the states may "make a value judgment favoring child-birth over abortion." Thus, the fact that the notice law may have increased births to teens affected by the law is not a constitutional indictment against the law. Such a fact would merely imply that parental influence, as required by the law, had encouraged teens to give birth rather than abort. Such parental guidance is hardly a result which violates the Constitution. But, in fact, the data undermine the claim that the notice law caused in-

creased births to teens either in Minnesota generally or in Minneapolis specifically.

The clinics' assertion rests entirely on data gathered from the Minneapolis Department of Health concerning residents of the City of Minneapolis only. See P. Exh. 116; T. 2072 (Dr. Paul Gunderson). The data do show an increase of 38.4% between 1980-84 in births to teens between the age of 15-17 who are residents of Minneapolis. See Table 5. For 1980-87, the birth rate of Minneapolis teens aged 15-17 is 39.1, 41.2, 42.7, 47.3, 54.1, 58.2, 62.2, 64.5, respectively. When seen within the context of demographic statistics throughout Minnesota and within demographic changes in Minnesota in the 1980's, however, the allegation that the increase is due to the notice law is doubtful.

Initially, it is important to realize that teens who are residents of Minneapolis make up roughly only 6% of the teen population of Minnesota. In 1981, the 15-17 year old female population for Minnesota was 107,784, while the female population in Minneapolis for ages 15-17 was only 6,548. Thus, the 38.4% increase in the birth rate in Minneapolis was limited to 6% of the state's population of 15-17 year olds.

Statistics throughout Minnesota show that the 38.4% increase in the birth rate to Minneapolis residents age 15-17 between 1980 and 1984 was unique to Minneapolis and did not occur in metropolitan Minneapolis or in Minnesota in general, as Table 5 and Figure 5a show. See also T. 2073-74 (Dr. Paul Gunderson). The birth rates for ages 15-17 in years 1980-1986 in metropolitan Minneapolis are 17.4, 17.2, 17.2, 15.1, 17.4, 16.5, 17.8. And the birth rate for ages 15-17 between 1980-86 in Minnesota as a whole is 17.5, 17.5, 16.6, 14.6, 16.1, 15.1, 15.6. In addition, Minneapolis differs in birth rate from other geographic regions in Minnesota for other age groups besides 15-17, particularly for ages 10-14, 18-19, and 25-34, as Table 5 and Figures 5b-5e show. Finally, the Minneapolis birth rate for 15-17 year olds continues

to climb throughout 1986 and 1987, even after the notice law was enjoined in March, 1986.

The number of births to teens as a percentage of all births in Minneapolis must also be considered. In Table 7 and Figure 7a, it is apparent that the percentage of births to minors in Minneapolis is lower than that found in the nation generally, but exhibits a remarkably parallel trend to the national trend over time. The selective increase in birth rate in Minneapolis is reflected in the Minneapolis line in Figure 7a, insofar as the percentage of total births to teen births in Minneapolis rises contrary to the national and statewide trend between 1986-1987. But this increase occurs later than we would expect were it a result of a law enacted in 1981. The real increase in the percent of births to minors does not happen until several years later: 1985, 1986, and 1987, when the law was no longer in effect. The increase in the 15-17 year old Minneapolis birth rate during 1981-83 is *not* accompanied by an increase in births to minors as a percentage of total births. This clearly parallels both the Minnesota and national trends in its decline during 1981-83. The opposing trends in Minneapolis in birth rate to minors 15-17 (Figure 5a) and percent of births to minors (Figure 7a) indicate that birth rates must have been increasing in general in Minneapolis from 1981-83, regardless of age. This indicates that the increase in birth rates in Minneapolis to minors during the enactment period of the notice law was merely part of a larger trend effecting all minors and adult women, including those not subject to the law.

Moreover, the increase in births for Minneapolis teens age 15-17 leads to a different conclusion when the Minneapolis population is examined in more detail. When the Minneapolis births are broken down by race, and compared with data from the National Center for Health Statistics, the increase in births to girls under 18 is seen to be largely confined to the minority population, spe-

effectively the population of Asian-Pacific. Figure 7b is a breakdown by race of the Minneapolis and national trend lines in Figure 7a. The Asian-Pacific Island percentage of births to minors deviates from the national trend and increases dramatically. All other races roughly parallel national trends in their decline, at least until 1986, when the notice law was enjoined. This would suggest that Asian-Pacifics are disproportionately impacting the birth rate for teens ago 16-17 in Minneapolis. It is implausible that the notice law would selectively impact Asian-Pacifics more than other races in Minneapolis. Therefore, other explanations for the Minneapolis increase in birth rate should be explored.

Figure 8 suggests one possible explanation--a substantial increase in the population of Asian-Pacific teens. Figure 8 shows the percent of minority enrollment in the Minneapolis Public School District from 1971 to 1987. This Figure shows that the percentage of Asian enrollment sharply increases between 1980-1981 and continues to increase from 1981-1987. It is precisely during this time that the percent of all births to minors for the Asian-Pacific population experienced the greatest increase. These statistics show an unusual increase in both the Asian-Pacific population in Minneapolis and in the percentage of births to minors for this population.

This increase in births to Asian-Pacific minors must be compared with the abortion behavior of this population. The abortion rate is important to consider because the clinics' challenge to the notice law is predicated on the assumption that it keeps minors from getting abortions. The notice law can directly influence only the abortion rate and the birth rate is influenced by a reduction in the number of abortions. This implies that as the influence of the notice law on the abortion rate decreases, its potential influence on the birth rate should also decline. Yet, Dr. Paul Gunderson testified to the virtual non-existence of abortion to the Asian-Pacific population. See

T. 2076 (Dr. Paul Gunderson commenting on the low abortion rate of Asians in Minnesota). It is improbable, therefore, that a group with an extremely low abortion rate before the law went into effect would be the most effected by the law in terms of birth rate. Some other factor(s), and not the notice law, must explain this increase.

In summary, the Minneapolis data do not support the contention that birth rates for teens in Minneapolis increased because of the notice law. When viewed in conjunction with the data from other regions of Minnesota, it appears that the notice law did not increase births to teens in Minneapolis. Together with the marked decrease in pregnancy rates and abortion rates in Minnesota, these data demonstrate that the notice law, as applied, is reasonably related to preserving parental authority and protecting the health of minors.

¹¹B.-M.-Lindfors-Harris et al, Response Bias... abortions...two Swedish Studies, (1991) Am. J. Epidemiol. Vol 134, No 9, Pg 1003.

¹²TIME, Jan. 14, 1991

¹³JAMA, July 21, 1993

¹⁴N. Eng. J. Med., Jan. 1994

¹⁵Remicmir, L. (1989) Int. J. Epidemiol. 18:498-510.

*The Deadly After-Effect
Of Abortion* ■

BREAST CANCER



Additional copies: One free with self-addressed stamped envelope; 50/\$11.00 (plus post.); 100/\$20.00 (plus post.); 500/\$30.00 (plus post.); 1000/\$150.00 (plus post.).

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A first pregnancy permanently changes the structure of a woman's breasts. Before she is pregnant, her breasts cannot produce milk, as the gland cells are immature and underdeveloped. When she becomes pregnant, estrogen and other hormones flood her system. This results in rapid growth in size, while the internal structure undergoes dramatic change.

Cells, previously dormant, rapidly grow into a system of branching ducts and gland cells capable of producing milk. Once this growth, change and maturing is complete, there is no further significant change the rest of her life. Once mature, the chance of the breast developing cancer is much less.

When these cells are changing and transitional, they are less stable and have much greater potential of becoming cancerous. If she completes her first pregnancy, this unstable period passes and her gland cells mature and stabilize.

But — if she interrupts her pregnancy, in its early phase - 90% of abortions are done in the first trimester - she in effect stops the development of the cells at this unstable, transitional phase. It seems apparent that cancerous changes can and do occur more frequently among these transitional cells of a woman who has terminated her pregnancy. If she aborts more than once before completing a pregnancy, her chance for cancer increases even more. A subsequent full term pregnancy helps, but sadly never removes the sharply increased threat of cancer.

There are over 1,500,000 abortions in the U.S. each year, 56% are first abortions, 44% second or more.

One woman in nine will develop breast cancer, and 25% of them will die.

Women who carry their first baby to term sharply cut their chance for breast cancer.

Women who abort their first pregnancy sharply increase their chance. With 2 or more abortions there is a 3-4 fold increase.

A 15 year old girl has about one in nine or an 11% lifetime risk of breast cancer. If she gets pregnant in her teens and has the baby, she reduces her risk to about 7.5%. However, if she has an abortion her risk rises to over 15% (assuming she has at least one child in her 20s). If the abortion sterilizes her, and/or for other reasons she never has another pregnancy, her risk rises to 50%.

In the United States, approximately 800,000 women abort their first pregnancy each year. Of these, 11% or 88,000 would have developed breast cancer, but, because of their abortions, the number of cancer cases will increase to approximately 130,000. Of these, 44,000 cases, 25%, or 11,000 additional women will die of breast cancer every year.

Abortion mortality
The abortion industry claims 1 per 100,000 women die from abortion per year in the U.S. If we add these 11,000 deaths to the 11,000 deaths annually from 234 deaths per 100,000 women due to mortality from childbirth, which is 110,000.

Is Breast Cancer Increasing?

Yes, in 1962 there were 63,000 cases
 in 1972 there were 90,000 cases
 in 1982 there were 120,000 cases
 in 1992 there were 180,000 cases

What increases a woman's risk?

Breast Cancer in close relatives; never having a baby; early onset and late cessation of menstruation; possessing certain genes; and induced abortion of first pregnancy are major risk factors.

Smoking, toxic chemicals, high fat diet, contraceptives and other drugs, alcohol, and electromagnetic fields are among other suspected risk factors.

What protects her?

Completing her first pregnancy by her early 20s.

We must also counsel her to not abort her first pregnancy. A spontaneous miscarriage does not increase her risk.¹

When was this first suspected?

Dr. M. Pike² at University of Southern California in 1981 did the first major study. He showed that aborting her first pregnancy increased her chance of developing Breast Cancer by a factor of 2.4 times.

There were other studies?

Yes. Dr. H. Howe³, using New York State official Health Department records, found that aborting her first pregnancy had a 1.7 times increased risk of Breast Cancer under age 40. If she also aborted her 2nd or/and 3rd pregnancy, her risk was 4.0.

Dr. Janet Daling's⁴ study in 1994 received worldwide publicity. She found:

- An induced abortion increased the risk of Breast Cancer before age 45 by 50%.
- If done before 18 years, it increased by 150%.
- If done after 30 years, it increased by 110%.
- If she had a family member with Breast Cancer and aborted after 30 years, her risk increased by 270%.
- All 12 women in the study, with such a family member who aborted before age 18, got Breast Cancer before age 45.

In Greece:⁵ An overall increased risk of 51% was reported in 1995.

New scientific evidence shows that the increase in abortions worldwide has caused a sharp increase in breast cancer. ■

Over twenty studies indicate that women who abort their first pregnancy have a much higher risk of developing cancer.



In Paris:⁴ Having at least two abortions is associated with an increased Breast Cancer risk of 2.1 times.

In USA:⁷ An increased risk of 23% was shown. For those over 60 years the risk was 80%.

How about recurrences?

In 1983 H. Ownby⁸ found among Breast Cancer patients whose disease had been in remission, a: 10% recurrence in women whose first pregnancy went to term.

20% recurrence in women whose first pregnancy was aborted.

30% recurrence in women who also aborted their second and/or third pregnancy.

And aggressiveness of the cancer?

Dr. H. Olsson⁹ found, if she had aborted her first pregnancy, that the cancer was more aggressive, metastasized earlier and was lethal more quickly as compared to women who had completed their first pregnancy.

What about studies showing no risk?

With few exceptions these were flawed by: inappropriately crude age matching or adjusting of controls (the main problem); interpreting as statistically insignificant some retrospective case controls with low statistical power; minimizing the actual results obtained in their conclusions; and attributing results to patient's "recall bias" even though a close exam refutes such a claim.¹⁰

The Swedish Lindford Harris Study¹¹ is an example of an invalid study. It claimed "no overall risk after abortion in the first three months" — but it:

- combined those who aborted their first pregnancy with those who completed their first pregnancy.
- had no control group. It compared with the total population which includes those who aborted.
- claimed "recall bias" with no proof.

In its conclusion it did not mention that in its findings it showed that:

- Women, aborted after a term delivery, equaled 58% of average risk.
- Women, aborted before a term delivery equaled 109% of average risk.

What about Contraceptive Pills?

If a causative factor, the risk is greater if taken before age 20 and/or for 10 years or more.

Why is this not reported?

TIME¹² Magazine and both the AMA¹³ and New England Journals¹⁴, in reviewing pre-disposing factors, did not include abortion. Dr. Remennick¹⁵ concluded "an initial attitude of researchers toward abortion usually determines the way they interpret results."

How many studies are there in the Medical Literature?

There are now over 50, and the vast majority of well done professional studies continue to point to a positive correlation between abortion and breast cancer.

J.C. WILLKE, M.D.

FOOTNOTES

¹MacMahon, B, et al (1970) Bull. Wld. Hlth. Org. 43:209-21.

²Pike MC, (1981) Brit. J. Cancer. 43:72-6.

³Howe HL, (1989) Int. J. Epidemiol. 18:300-4

⁴Daling, J. et al, Risk of Br. Ca. Among Young Women, J. Nat. Ca. Inst., Vol.86, No.21, Nov 2, '94, Pg. 1584.

⁵Lipworth, L, (April 1995) Int. J. Cancer.

⁶Andrica, N. Role of Genetic and Repro. Factors (1994)

⁷Newcomb, P. et al, (1996) Preg. Termin. & Risk of Br. Ca. JAMA, Vol. 275, No. 4, Pg. 293.

⁸Ownby, H., Interrupted Preg...Poor Prognosis...in Br. Ca. (1983) Br. Ca. Res. Treat 3:339-344.

⁹Olsson, H. et al, (1991) Cancer 67:1285-90.

¹⁰Brind, Joel, Baruch College, numerous articles Natl. Right to Life News

AUL



FAXLINE

TALKING POINTS re: the Danish abortion study by Melbye et al., published in the 1/9/97 New England Journal of Medicine (NEJM)

1. Study's enormity is exaggerated: Database is highly skewed

—Of the 1.9 million women studied, 1.2 million neither have had exposure to induced abortion nor have developed breast cancer.

—Of the 281,000 women who had induced abortions, most are too young to have developed breast cancer (Some are still teenagers).

—Of the 10,000 women who developed breast cancer, most are too old to have their abortion histories on record, since the abortion registry only goes back to 1973 (when the oldest women were 38).

—Of the 1338 women who had abortions and did develop breast cancer, over 81% had abortions recorded only at age 30 or over; 54% at age 35 or over.

2. Important data are omitted or de-emphasized

—Among the women who had abortions as teenagers the study actually found essentially the same increased risk (29%) as had been reported in Erind et al.'s Comprehensive Review and Meta-analysis of 23 worldwide studies (a statistically significant 30% overall elevated risk), published last October. However, Melbye et al.'s finding is not statistically significant, because their statistical power is too low.

—The Melbye study actually found a statistically significant trend of a 3% risk increase for each week of gestation before abortion, even within the first trimester: Women who had an abortion of an 11-12 week fetus showed a 12% higher breast cancer risk, with the risk increase rising to 89% for abortions after 18 weeks (but it wasn't in the study's "Conclusions").

—Much data was missing from the paper: No information was given on the independent effect of other variables that influence breast cancer risk, and we are shown only relative risk data after adjustment for these variables. Somehow, an unadjusted overall relative risk of 1.44 is adjusted down to 1.00.

3. Previous studies are attacked or misrepresented

—Melbye et al. attacked the validity of the meta-analysis and all case-control (interview-based data) on the basis of alleged response-bias, citing a 1991 Swedish study. However, the only significant evidence of response bias depends on the assumption that 7 Swedish breast cancer patients reported abortions that never took place (alleged "overreporting"). Response bias is the "Loch Ness Monster" of abortion-breast cancer research: No credible evidence of it has yet been produced.

—4 previous cohort studies are cited as reporting similar findings of no increased risk with induced abortion. But 2 of the studies are exclusively on spontaneous abortion (miscarriage), and one is mostly on spontaneous abortion and does not report any specific data on induced abortion.



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A scientific perspective on the Danish abortion study
published in the 1/9/97 New England Journal of Medicine (NEJM)

MYTHS AND FACTS. Prepared by Joel Brind, Ph.D., Professor of endocrinology, Department of Natural Sciences, Baruch College, City University of NY, 1/13/97

Myth 1

The Danish study's lead author, Dr. Mads Melbye, told the Wall Street Journal (1/9/97):

"I think this settles it. Definitely—there is no overall increased risk of breast cancer for the average woman who has had an abortion."

Dr. Patricia Hartge of the National Cancer Institute, in a NEJM Editorial accompanying the Danish study, echoed "the clear central finding that there is no overall risk", and concluded: "In short, a woman need not worry about the risk of breast cancer when facing the difficult decision of whether to terminate a pregnancy."

Fact

Said Dr. Karin Michels of Harvard Medical School, as quoted in the 1/9/97 Wall Street Journal: "You should never end a debate with one study and say this is the definitive study"

In fact, this one study from Denmark is the 30th separate study published since 1957 to report specific data on induced abortion and breast cancer. It is only the sixth one not to show an overall increased risk, compared to 24 that do show an increased risk, 18 of which are statistically significant on their own.

Contrary the implication of most current media reports, the Brind study, the comprehensive review and meta-analysis, published in the October, 1996 Journal of Epidemiology and Community Health the epidemiology journal of the British Medical Association, is not one of the 30 studies: it is a compilation of the entire worldwide literature, which pooled the results of the 23 separate studies available at the time of its preparation. This study of studies found a statistically significant, 30% overall risk increase.

Myth 2

The Danish study is different. One reason it is definitive is its enormous size, including over 1.5 million women (most Danish women), over 280,000 of whom had one or more induced abortions. Moreover, the study includes over 10,000 women with breast cancer.

Fact

The enormous size of the Danish study is enormously misleading, because this is a cohort study, in which an entire population (or cohort) of women is followed for many years, to track exposures to the alleged risk factor (induced abortion) and the incidence of the disease in question (breast cancer). Consequently, most of the women in the cohort (over 1.2 million of the 1.5 million) have neither the exposure nor the disease in question, but their presence in the cohort inflates the size of the study.

Myth 3

Even so, the number of women with abortion and breast cancer is very large, which gives this study unusually large statistical power. According to Dr. Hartge, in her NEJM editorial:

"In this cohort of 1.5 million women, 1338 cases of breast cancer were diagnosed in women who had

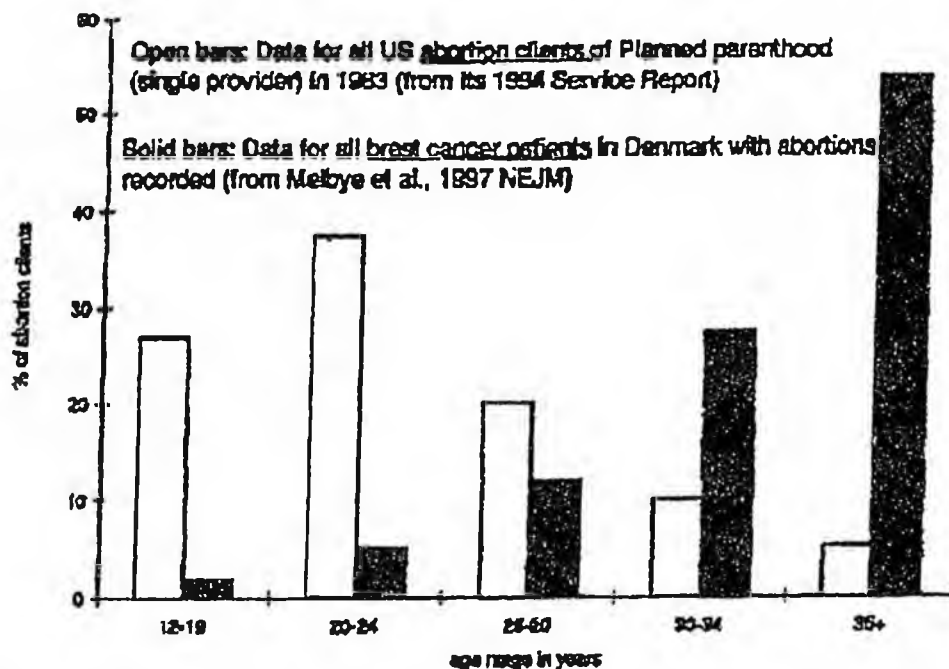
terminated pregnancies. By comparison, large case-control studies in the United States each have included 200 to 300 cases of breast cancer in women who had abortions."

Fact

The selection of such a large part of the Danish population (i.e., women born back to 1935), yields a data base which is very distorted because only abortions occurring since 1973 are on record. Consequently, the majority of breast cancer patients in the Danish study who are on record as not having had any abortions (8,908 women) were in their 30's when abortion data were first collected. Consequently, their abortion history is largely unknown. Keep in mind that we are speaking of a very small proportion of the entire cohort—but the majority of breast cancer victims—since breast cancer is found overwhelmingly among the oldest members of the cohort.

Among the 1338 breast cancer patients whose abortions are on record, the majority of them are on record as having had abortions only at age 35 or over. In fact, over 81% of them have abortions recorded only at age 30 or over!

The egregious distortion of the age distribution of abortion clients is best illustrated by a graphic comparison with US data for the average year (1983) for which the abortions are recorded:



From the above graph, it is easily seen that the Danish (Melbye) study is therefore considerably weaker than its authors and proponents indicate: The statistical power of the study relies largely on a database which is questionable for three reasons:

- 1) It consists mostly of women too young for cancer to develop (those who had abortions and did get breast cancer having had their abortions when they were atypically old);
- 2) The abortion histories of the oldest women in the cohort (which includes most of the women who did get breast cancer) before their fourth decade of life are largely unknown.

3) Concerning the fate of women who have abortions at younger ages—particularly in their teens—the study has almost no statistical power. That is why, even though it shows a 29% risk increase for women who had any abortions as teenagers (the same magnitude of the overall risk increase calculated for women in the Brind meta-analysis), the figure is not statistically significant:

The database only contains a total of 23 cases of breast cancer among women with teenage abortions, and a grand total of only 252 cases of breast cancer for all women who had abortions before the age of 30. That puts the study's real statistical power in the same range as the American studies Dr. Hartge refers to in her editorial.

Unfortunately, the effect of including all the older women (who have most of the breast cancer, but a relatively small portion of the recorded abortions) and all the younger women (who have most of the abortions, but almost none of the breast cancer), is to dilute the statistics, making the calculated relative risk appear lower and at the same time, more precise than it really is. (The summary finding of the Melbye study is an overall relative risk of 1.00 [i.e., no risk increase with induced abortion], and a 95% confidence interval of 0.94-1.06.)

Myth 4

Even though the sample size for women with abortion at younger ages is limited, the Danish data should show some sort of trend, if there were a real risk increase due to abortion. But there is no trend, Dr. Melbye arguing "the oldest women have exactly the same (relative) risk as the younger women."

Fact

As noted above, women who got abortions in their teens showed a 29% higher risk of breast cancer. This was, in fact, noted in the text of the results section (but interestingly, not in the discussion or the abstract):

"Age at the time of the induced abortion did not significantly influence the overall risk, but there was a tendency toward a higher risk of breast cancer among women in the lowest age category—between 12 and 19 years of age (relative risk, 1.29; 95% confidence interval, 0.89 to 2.08)." The lack of significance and lack of effect on observed overall risk is a direct consequence of the lack of statistical power of this supposedly definitive study.

Myth 5

The credibility of the overall finding of no increased risk in the Melbye study is supported by previous research. According to the first paragraph of the authors' Discussion section: "This result is very much in line with the results of previous retrospective cohort studies 9,10,15,16".

Fact

This statement is a flat-out misrepresentation of the medical literature: Three of the four studies cited (as footnotes) to back it up are entirely irrelevant. Two concern spontaneous abortion (miscarriage) exclusively 9,16 and one concerns spontaneous abortion mostly, and does not present any data relating specifically to induced abortion.10

Myth 6 (The "Loch Ness Monster")

It isn't just the statistical power of the study that's important, but the fact that the data are collected

prospectively (i.e., at time of abortion) means they do not depend on the accuracy of study subjects' own reporting of past, personally sensitive events. According to Dr. Hartge, in her NEJM editorial:

"By relying on uniformly collected data on abortion in Danish registries, Melbye et al. avoided the major problem that has plagued case-control interview studies: differential reporting of abortions (response bias)".

Melbye et al. used this argument to attack the Brind meta-analysis directly: "However, since almost all 23 studies included in the analysis were case-control studies, it is not unreasonable to assume that many of them were inherently biased, making the pooled conclusions biased as well."

Fact

Many scientists insist that this potential source of error is responsible for the result whenever a study shows that abortion is associated with increased breast cancer risk. In fact, this is the third time in a little over two years that the National Cancer Institute has used the response bias argument, via medical journal editorials, to attack such research. Like the famous mythological Loch Ness Monster, they insist that it is there. But every time a study actually looks for evidence of its presence, the only credible evidence they can ever find is against it.

When comparing the abortion histories of breast cancer patients with those of healthy women, a finding of more abortions among the patients will show up statistically as an increased risk. The argument is essentially this: If the cancer patients report more of their abortions than the healthy women do, then their breast cancer risk will appear artificially increased, due to this response bias (bias meaning difference between the two groups).

Melbye et al. are less than forthright in their Danish study in their attack on the Brind meta-analysis: One could hardly tell from their discussion that the meta-analysis spent over 1,000 words of text meticulously analyzing the alleged evidence of such bias. Yet still, they hark back to a 1991 Swedish study which compared computer prospective cohort data with case control interview-based data on the same population of Swedish women. That study claimed statistically significant evidence of underreporting of previous induced abortions among controls relative to overreporting among cases. In other words, the significance of the finding was largely dependent upon the belief that the seven breast cancer patients who reported having had abortions of which the computer registry had no record, had overreported them, i.e., had made them up!

Until the Danish study's appearance in the 1/9/97 NEJM, the most recent citing of the monster was in the 12/4/96 Journal of the National Cancer Institute (JNCI). That issue of the JNCI contained a Dutch case-control study which attributed the 90% increased risk it found among women with abortions to response bias. However, a careful reading of the study reveals the authors found significant evidence of response bias between healthy women from different regions of Holland, but no bias between breast cancer patients and healthy women at all. That didn't stop NCI editorialists from hyping these results and unleashing the monster: . . . a Swedish study . . . show(ed) that healthy women consistently and widely underreport their history of induced abortion.

Meanwhile, strong evidence against the response bias argument has surfaced repeatedly: 1) A 1989 New York State computerized registry study found a 90% increased breast cancer risk among women with induced abortions; 2) A 1994 Seattle, Washington study found a 50% increased risk and used cervical cancer data to test specifically for response bias among these women—and found none; 3) A 1995 study among Greek women found a 51% increased risk, and cited other studies among Greek women in drawing their conclusion that healthy women in Greece report reliably their history of induced abortion.

Myth 7

According to a 1/10/97 New York Times editorial: The only uncertainty in the Melbye study) was a suggestion that women who had abortions in the second or third trimester did have an increased risk of breast cancer, but the number of women in this category was too small to warrant firm conclusions.

The falsehood of the first phrase is obvious to anyone familiar with any epidemiological study: All findings are subject to varying degrees of uncertainty. The rest of the statement is a masterpiece of under statement. Consider the actual relevant part of the Results section of the paper: With each one-week increase in the gestational age of the fetus, however, there was a three percent increase in the risk of breast cancer. In fact, the relative risk rose from a 19% (non-significant) risk decrease for women whose abortions occurred at less than seven weeks gestational age, to a significant 89% risk increase for women with post 18-week abortions. Moreover, a risk elevated above the norm started showing up for women with late first trimester abortions (11-12 weeks).

In fairness to the New York Times, however, the authors themselves de-emphasized the finding, failing even to mention it among the "Conclusions" in the paper's abstract. Thankfully, this error of omission did not go unnoticed, drawing sharp criticism from Dr. George Bonney, Chairman of Biostatistics at the Fox Chase Cancer Center in Philadelphia, who told the Washington Post: "This is a powerful group (Melbye et al.), that should know better".

Yet the most important aspect of this finding of significantly increased risk with increasing gestational age at abortion is that Melbye et al. acknowledged it as supporting the biological basis of abortion as a breast cancer risk factor. That is, growth promotion of primitive (and potentially cancer forming) breast cells by surging estrogens during pregnancy may increase breast cancer risk if the pregnancy is aborted. Theoretically, the longer the exposure to this hormonal stimulus, the greater the risk increase. Although other studies have not found a consistent difference in early v. late first trimester abortions, this one did, and the authors call this finding to be "in line with the hypothesis".

Concluding Remarks

Ample evidence has been presented above to show that the authors' "Conclusions: Induced abortions have no overall effect on the risk of breast cancer." is, to say the least, a gross oversimplification. But there are additional concerns: First, a great deal of information about the effects of other variables is missing from the paper, as well as the unadjusted relative risk calculations. In fact, the unadjusted overall relative risk can be calculated at 1.44—a 44% risk increase. Of course, this figure doesn't mean much without adjustment, but how it manages to decrease to 0% increased risk is a disturbing mystery. Dr. Melbye (personal communication) says that they had to shorten the paper considerably for publication, but then one wonders why there is then so much redundancy in it: most of the data in the paper's only table is repeated in the text.

Second, it must be noted that one of the variables adjusted for in this (and most other) studies, is age at first full term pregnancy. That's because delaying the first full term pregnancy is universally recognized to increase breast cancer risk. Induced abortion surely increases risk when performed on young childless women, since it delays the full term delivery that would otherwise naturally have occurred. This increase, being specifically subtracted out, does not show up in any study (including the Brind meta-analysis) that is looking for the specific effect of induced abortion on breast cancer risk.

Finally, it must be acknowledged that computerized cohort data are generally of better quality than interview-based data, all other things being equal. The difficulty with computerized data on the risk of a disease like breast cancer is that it takes years—perhaps 5 to 50 years— for cancer to show up in exposed women. And abortion registries are not generally that old. Computerized registry ~~data~~ are most useful when the outcome in question does not require such a long follow up period. A perfect example is a 1996 study using the Finnish abortion registry. In this British Medical Journal paper, Dr. Mika Gissler et al. found a very reliable, almost sixfold (4888) increase in the rate of suicide by women who had had an induced abortion in the previous year, compared to women who had a baby.

CHAPTER 21

MATERNAL DEATHS AND LONG TERM COMPLICATIONS

— ABORTION — CHILDBIRTH —

It is claimed by abortion proponents that abortion is safer than childbirth. They claim 1 death per 100,000 abortions compared to 10 deaths per 100,000 deliveries . . .

Not True

What is the maternal mortality from childbirth?

Reported average maternal mortality 1979 through 1986 was 9.1 per 100,000 deliveries, having declined from 11 to 7.4.

Morbidity & Mortality Report, July 1991,
Cent. Dis. Cont., Vol. 40, No. 35-1

If all causes of maternal death, other than those associated with live birth i.e., abortion, tubal pregnancy, molar pregnancy, etc., were excluded. . . . "the maternal mortality for 1985 would be 4.7 deaths per 100,000 live births."

"Induced Termination of Preg. . . ." Council on Scientific Affairs, AMA; JAMA, Dec. 9, '92, Vol. 268, No. 22, p. 3231

And the rate has dropped further since the above, but the U.S. Center for Disease Control (see Chapter 17) does not break down their figures. It continues to report a figure for "maternal mortality" that includes abortion and other deaths.

But some mothers do die?

In developed nations, almost never. The National Maternity Hospital in Dublin, Ireland, receives many complicated cases from around that nation and delivers 10% of all births in Ireland. In 10 years (1970-79) it delivered 74,317 births at more than 28 weeks gestation with only one woman dying from a cause related to her pregnancy.

J. Murphy et al., Therapeutic Ab., The Medical Argument, Irish Med. J., Aug. '82, Vol. 75, No. 8

Ed. note: And this report was from two decades ago. Since then medical care has improved substantially.

Abortion Deaths

These have been grossly under-reported. The 'expose' on this is detailed in *Life 5* published by Life Dynamics. The author and his staff have verified 23 deaths from induced abortion in 1992-93. All were reported to state agencies. There is documentation from state health departments that 18 were reported to the Federal Center for Disease Control. However, the official report of the CDC listed only 2 deaths.

"At Life Dynamics we knew abortion complications were grotesquely under-reported, but attributed it to garden-variety bureaucratic incompetence. But after continuing research, they documented "that the flawed abortion data from the CDC was not from ineptitude but of dishonesty and manipulation" after finding that "a large percentage of CDC employees

direct ties to the abortion industry," they retitled the CDC to stand for "Center for Damage Control" — "The CDC doesn't oversee abortion, it justifies it."

M. Crutcher, *Life 5-Exploited by Choice*, Genesis Pub., Chapter 3, "Cooking the Books," p. 135.

The claim that relevant statistics can be collected from the place where the abortion was performed "is little short of science fiction."

"Complications following abortions performed in free-standing clinics is one of the most frequent gynecologic emergencies . . . encountered. Even life-endangering complications rarely come to the attention of the physician who performed the abortion unless the incident entails litigation. The statistics presented by Cates represent substantial under-reporting and disregard women's reluctance to return to a clinic, where, in their mind, they received inadequate treatment."

L. Iffy, "Second Trimester Abortions," JAMA, vol. 249, no. 5, Feb. 4, 1983, p. 588.

What can cause her death?

The main causes are infection, hemorrhage and uterine perforation.

How often do women get infection as a consequence of induced abortion?

A study from one of the most prestigious medical centers in the world, John Hopkins University, reported: "Occurrence of genital tract infection following elective abortion is a well-known complication." This institution reports rates up to 5.2% for first trimester abortions and up to 18.5% in midtrimester.

Burkman et al., "Culture and Treatment Results in Endometritis Following Elective Abortion," *Am J Obstet Gynecol*, vol. 128, no. 5, 1977, pp. 556-559.

For the local freestanding abortion facility in your

community, with far inferior quality of care, the number of such infections will be at least double that of such a medical center.

"One sequel to abortion can be a killer. This is pelvic abscess, almost always from a perforation of the uterus and sometimes also of the bowel," said two professors from UCLA, in reporting on four such cases.

C. Gassner & C. Ballard, *Amer. Jour. OB/GYN*, vol. 48, p. 716 as reported in *Emerg. Med. After Abortion-Abscess*, vol. 19, no. 4, Apr. 1977

In an underdeveloped country, complications are more frequent and treatment is usually less available and effective.

Can infection cause damage?

Infection in the womb and tubes often does permanent damage. The Fallopian tube is a fragile organ, a very tiny bore tube. If infection injures it, it often seals shut. The typical infection involving these organs is pelvic inflammatory disease (PID).

Patients with Chlamydia Trachomatous infection of the cervix (13% in this series) who get induced abortion "run a 23% risk of developing PID."

E. Quigstad et al., *British Jour. of Venereal Disease*, June 1982, p. 127

"Pelvic Inflammatory Disease (PID) is difficult to manage and often leads to infertility, even with prompt treatment . . . Approximately 10% of women will develop tubal adhesions leading to infertility after one episode of PID, 30% after two episodes, and more than 60% after three episodes."

M. Spence, "PID: Detection & Treatment," *Sexually Transmitted Disease Bulletin*, John Hopkins Univ., vol. 3, no. 1, Feb.

"Acute inflammatory conditions occur in 5% of the cases, whereas permanent complications such

chronic inflammatory conditions of the female organs, sterility, and ectopic [tubal] pregnancies are registered in 20-30% of all women . . . these are definitely higher in primigravidas [aborted for first pregnancy]."

A. Kodacek, "Artificial Termination of Pregnancy in Czechoslovakia," *Internat'l Jour. GYN/OB*, vol. 9, no. 3, 1971

Venereal disease, usually Gonorrhea or Chlamydia, causes PID. This, if present, vastly complicates an induced abortion.

"Chlamydia trachomatous was cultured from the cervix in 70 of 557 women admitted for therapeutic abortion. Among the 70, 22 developed acute PID postoperatively (4% of the total)."

E. Quigstad et al., "PID Associated with C. Trachomatous Infection, A Prospective Study," *British Jour. of Venereal Disease*, vol. 59, no. 3, 1982, pp. 189-192

Another study revealed a 17% incidence of post-abortion Chlamydia infection.

Barbacid et al., "Post Abortal Endometritis and Chlamydia," *OB & GYN*, 68:686, 1986.

In a classic English study at a university hospital which reported on four years' experience, "there was a 27% complication rate from infection."

J.A. Stallworthy et al., "Legal Abortion: A Critical Assessment of its Risks," *The Lancet*, Dec. 4, 1971

What of bleeding?

Bleeding is common. Most get by, but some need blood transfusions. The Stallworthy study (above) reported that 9.5% needed transfusions. Most recent studies are reporting smaller percentages.

Are blood transfusions a cause of death in abortions?

Yes, and these deaths are never associated directly nor reported as statistics related to abortions. Here is

how this works:

First, we must know how many women need blood transfusions after getting induced abortions. These figures are hard to come by. The only controlled studies are from university medical centers, which do only a small fraction of all abortions. Over 90% of abortions in the U.S. and varying percentages in other nations are done in free-standing abortion chambers where the medical care is only a faint shadow of the competence of those medical centers. Women who hemorrhage from these abortions are sent to "real" hospitals for transfusions and surgery. The percentage who need transfusions then must remain an estimate as these commercial establishments do not report this.

How many then? Let's be conservative and say that one in every hundred needs a blood transfusion. If there are 1,600,000 abortions annually in the United States, this means that 1% or 16,000 women were transfused.

Viral hepatitis is transmitted in up to 10% of patients transfused. Ten percent of 16,000 is 1,600 women.

Amer. Assn. Blood Banks and Amer. Red Cross
Circular Information, 1984, p. 6

An analysis of 300,000 cases of Hepatitis virus infection showed that deaths occurred from three causes: 322 from acute disease, 5100 from cirrhosis, and 120 from liver cancer. This mortality rate is over 2%.

R. Voelker, Hepatitis B: Planned Parenthood
Med. News, Oct. 13, '89, p. 17

Two percent of 1600 women means that ultimately 32 deaths result annually from abortions for this reason.

AIDS is another threat. Two percent of AIDS have been acquired by blood transfusions. With recent careful screening techniques, this is now much less. But so, 200-400 people in developed countries, people who are still being exposed via blood transfusions.

Noyes, "Transfusions Risk Despite Screening,"
Family Practice News, May 15, 1987.

In underdeveloped nations the AIDS threat ranges from seldom to common.

Are blood clots ever a problem?

Blood clots are one of the causes of death to mothers who deliver babies normally. They are also a cause of death in healthy young women who have abortions performed.

Embolism (floating objects in the blood that go to the lungs) is another problem. Childbirth is a normal process, and the body is well prepared for the birth of the child and the separation and expulsion of the placenta. Surgical abortion is an abnormal process, and slices the unripe placenta from the wall of the uterus into which its roots have grown. This sometimes causes the fluid around the baby, or other pieces of tissue or blood clots, to be forced into the mother's circulation. These then travel to her lungs, causing damage and occasional death. This is also a major cause of maternal deaths from the salt poisoning method of abortion.

For instance, pulmonary thromboembolism (blood clots to the lungs) was the cause of eight mothers dying from abortions, as reported to the U.S. Center for Disease Control.

W. Carrs et al., *Amer. Jour. OB/GYN*, vol. 132, p. 169

And this can occur in those as young as 14 years old.

Pediatrics, vol. 68, no. 4, Oct. 1971

Also, amniotic fluid embolism has "emerged as an important cause of death from legally induced abortion." Of 15 cases, the risk seems to be greater after three months. Treatment is ineffective.

R. Gaidotti et al., *Amer. Jour. OB/GYN*,
vol. 41, 1981, p. 257

And has an 80% mortality rate.

S. Clark, Amniotic Fluid Embolism, the Female Patient, vol. 14, Aug. '89, p. 50

What is Disseminated Intravascular Coagulation?

This is a sudden drop in blood clotting ability which causes extensive internal bleeding and sometimes death. The classic paper was on hypertonic saline (salt poisoning) abortions (see reference below).

H. Glueck et al., "Hypertonic Saline Abortion: Correlation with D.I.C.," *JAMA*, vol. 223, no. 1, July 2, 1973, pp. 28-29

"Saline-induced abortion is now the first or second most common cause of obstetric hypofibrinogenemia." [Same as D.I.C. above].

L. Talbert, Univ. of NC, "DIC More Common Threat with Use of Saline Abortion," *Family Practice News*, vol. 5, no. 19, Oct. 1975

In recent years this method has been seldom used. However, D.I.C. has also been caused by D&E and Prostaglandin abortions.

White et al., "D.I.C. Following Three MID-Trimester Abortions," *Anesthesiology*, vol. 58, 1983, pp. 99-100

Apart from deliberate mis-reporting to mask abortion death, are there others innocently missed?

Yes. For instance:

- Consider the mother who hemorrhaged, was transfused, got hepatitis, and died months later. Official cause of death, Hepatitis. Actual cause, abortion.
- A perforated uterus leads to pelvic abscess, sepsis (blood poisoning), and death. The official report of the cause of death may list pelvic abscess and septicemia. Abortion will not be listed.
- Abortion causes tubal pathology. She has an ectopic pregnancy years later and dies. The cause listed will be ectopic pregnancy. The actual cause, abortion.

- Deep depression and guilt following an abortion leads to suicide. The cause listed, suicide! Actual cause, abortion.

But many are mis-reported on the original death certificate and are not quite innocent.

- The kindhearted surgeon, unable to save the life of an abortion victim, feels that she and her family have been punished enough. He doesn't want to ruin her and her family's reputation in the community — so he forgets to mention abortion on the death certificate.
- If the abortionist does the follow-up care and the patient dies from the abortion, the abortionist doesn't want the reputation of being a butcher, so another cause is listed.
- Usually, however, a different doctor sees a patient who dies from the damage done from an abortion, but she and her family hotly deny the abortion. The abortion connection cannot be absolutely proven, and the new doctor fears a suit for malpractice or for defamation of character, and so he lists another cause.

You mean all maternal deaths from abortion are not reported?

That's exactly correct. The official reporting agency for the U.S. government is the Center for Disease Control in Atlanta, Georgia. Listen to this:

During the two-year stretch of 1991 and '92, the CDC officially reported only one mother each year dying from induced abortion. In fact, there are 20 documented deaths. Of these, 14 were reported directly to the CDC from state health agencies. The CDC only listed two of them. Mr. Crutcher's book, *Line 5*, which accuses this agency of gross dishonesty and malfeasance in its reporting, is extremely convincing.

M. Crutcher, *Life Dynamics*, personal communication, July '93

Even so, the situation today is better than the "5,000 to 10,000 women who died annually in the U.S. from back-alley abortions," isn't it?

These figures, often cited by pro-abortionists, are simply false. During the debate on the floor of the U.S. Senate on the Hatch-Engleton Pro-Life Amendment in 1983, the U.S. Bureau of Vital Statistics provided the data on such deaths.

Its reports showed that you must go back to the pre-Penicillin era to find more than 1,000 maternal deaths per year from illegal and legal abortions combined. The precipitous drop in maternal deaths in the 1950s and '60s occurred while abortions were still illegal. Before the first state legalized abortions in 1966, the total deaths were down to 120 per year. By 1972, before the Supreme Court legalized abortion in all 50 states, it was down to 39 per year in the entire U.S. Since legalization, the slow decline has continued, so that now the only difference is that more mothers are dying from legal, rather than illegal abortions.

U.S. BUREAU OF VITAL STATISTICS
CENTER FOR DISEASE CONTROL

YEAR	Reported Maternal Deaths from Illegal Abortion in U.S.
1940	1,679
1950	316
1960	289
1966	120 First State Legalized in 1967
1970	128
1972	39 Supreme Court Decision in 1973
1977	21
1981	8

Taken from U.S. Senate

What of pregnancy and abortion in teenagers?

Early on, it was thought that pregnancy in young teenagers was more risky than in older women. But recent studies have shown that teenage mothers have no more risks during pregnancy and labor, and their babies fare just as well as their more mature sisters' babies, if they have had good prenatal care.

"We have found that teenage mothers, given proper care, have the least complications in childbirth. The younger the mother, the better the birth. If there are more problems, society makes it so, not biology."

B. Sutton-Smith, *Jour. of Youth and Adolescence*
As reported in the *New York Times*, April 24, 1979

"No relationship between mother's physical growth and maturation and adverse pregnancy course or outcome was demonstrated.

Sukanich et al., "Physical Maturity and Pregnancy Outcome Under 16 Years," *Pediatrics*, vol. 78, no. 1, July 1986, p. 31

Dr. Jerome Johnson of John Hopkins University, and Dr. Felix Heald, Professor of Pediatrics, University of Maryland, agree that the fact that teenage mothers often have low birth weight babies is not due to "a pregnant teen-ager's biologic destiny." They pointed to the fact that the cause for this almost invariably is due to the lack of adequate prenatal care. "With optimal care, the outcome of an adolescent pregnancy can be as successful as the outcome of a non-adolescent pregnancy."

Family Practice News, Dec. 15, 1975

"The overall incidence of pregnancy complications among adolescents 16 years and younger is similar to that reported for older women."

E. Hopkins, "Pregnancy Complications Not Higher in Teens," *OB-GYN News*, vol. 15, no. 10, May 1980

"Obstetric and neonatal risks for teenagers over 15

are no greater than for women in their twenties, provided they receive adequate care."

There is evidence that in 15- to 17-year old women, pregnancy may even be healthier than in older ages.

E. McAnarney, "Pregnancy May Be Safer," *OB-GYN News*, Jan. 1978.

Pediatrics, vol. 6, no. 2, Feb. 1978, pp. 199-203.

F. Avey, Canada Col. Family Physician, "Pregnant Teens . . ." *Family Practice News*, Jan. 15, 1987, p. 14.

But the abortion picture is different, particularly in regard to cervical damage.

After years of legalized abortion experience, a pro-abortion professor of OB/GYN at the University of Newcastle-on-Tyne reported on his follow-up, ranging from two to twelve years, of 50 teenage mothers who had been aborted by him. He noted that "the cervix of the young teenager, pregnant for the first time, is invariably small and tightly closed and especially liable to damage on dilatation." He reported on the "rather dismal" results of their 53 subsequent pregnancies:

Six had another induced abortion.

Nineteen had spontaneous miscarriages.

One delivered a stillborn baby at 6 months.

Six babies died between birth and 2 years.

Twenty-one babies survived.

J. Russell, "Sexual Activity and Its Consequences in the Teenage Clinics in OB, GYN, vol. 1, no. 3, Dec. 1974, pp. 683-687.

"Physical and emotional damage from abortion is greater in a young girl. Adolescent abortion candidates differ from their sexually mature counterparts in these differences contribute to high morbidity." They have immature cervixes and "run the risk of a difficult potentially traumatic dilatation." The use of laminaria "in no way mitigates our present concern over problems of abortion."

C. Cowell, *Problems of Adolescent Abortion*, Ortho Panel 14, Toronto General Hospital

"The younger the patient, the greater the gestation (age of the unborn), the higher the complication rate. . . . Some of the most catastrophic complications occur in teenagers."

"Eighty-seven percent (87%) of 486 obstetricians and gynecologists had to hospitalize at least one patient this year due to complications of legal abortions."

M. Bulfin, M.D., *OB-GYN Observer*, Oct.-Nov. 1975

Abortions May Be Legal But They Are Not Always Safe

No. 88-1125, 88-1309

IN THE
Supreme Court of the United States
OCTOBER TERM, 1989

JANE HODGSON, M.D., *et al.*,
Petitioners, Cross-Respondents,

v.

STATE OF MINNESOTA, *et al.*,
Respondents, Cross-Petitioners.

On Writ of Certiorari to the United States Court of Appeals
for the Eighth Circuit

BRIEF OF THE ASSOCIATION OF
AMERICAN PHYSICIANS AND SURGEONS (AAPS)
AS *AMICUS CURIAE* IN SUPPORT OF
STATE OF MINNESOTA

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INTEREST OF THE *AMICUS CURIAE* *

The Association of American Physicians and Surgeons, Inc. (AAPS), a not-for-profit corporation, is the largest association of private practicing physicians in the United States. AAPS is comprised of active, practicing physicians and osteopaths of all specialties, from every state and territory in the United States and the District of

* This brief is filed with the written consent of the parties, copies of which have been filed with the Clerk of this Court.

Columbia. One purpose of the AAPS is to protect and preserve the private practice of medicine in all of its aspects. AAPS supports the right of patients, both adults and minors, to be provided full and accurate medical information with which to render informed decisions pertaining to their medical treatment. The AAPS recognizes the importance of involving parents in the medical treatment of minors, particularly in the provision of surgical procedures. Many of the members of the AAPS are pediatricians and obstetricians/gynecologists who routinely provide medical services to minors. In addition, many AAPS members are family practitioners whose practices involve working with the family, as a unit, in the provision of medical treatment. For these reasons, the issues involved in this case are of acute interest to the Association.

SUMMARY OF ARGUMENT

In this challenge to the Minnesota parental notice of abortion law, as applied, Minnesota abortion clinics and physicians have launched a selective attack to overturn this Court's decisions in *H.L. v. Matheson*, 450 U.S. 398 (1981), *Bellotti v. Baird*, 448 U.S. 622 (1979), and *Planned Parenthood v. Ashcroft*, 462 U.S. 476 (1983), as well as the constitutional principle that parents have fundamental rights to rear and raise their minor daughters in the area of abortion decision-making. The clinics' record in this case focuses exclusively on a minute subsection of Minnesota teens—those who sought elective abortions through judicial bypass—constituting only 25% of all pregnant teens and never more than .34% of the entire population of Minnesota teens aged 10-17. The clinics attempt to establish the unremarkable proposition that parents and teenagers do not always see eye to eye on teens' activities, that some parents may be abusive, that parents may react with grief, fear, or anger when they suddenly discover that their minor, unwed daughter is unexpectedly pregnant, and that this discovery may

not improve but may harm the parent-teen relationship. The record contains several stories of sad and unfortunate relations between parents and their children. But these conflicts are part and parcel of the parent-child relationship throughout history, and, as part of that relationship, have defined parental authority throughout Anglo-American law. In this sense, adolescent pregnancy is no different than many other serious, adverse events in the lives of teenagers and their families—for example, drug abuse, juvenile delinquency, or failure in school. It is in these very circumstances that parental authority is defined by the law's reaffirmation and support.

If the clinics could show that the notice law resulted in tangible threats to the health of minors generally in Minnesota—above and beyond that normally posed by pregnancy and elective abortion themselves—that minors suffered increased abuse from parents, that physicians were prevented from providing prenatal care, or that minors were denied prenatal care, it would then be plausible for the clinics to claim that the notice law was not reasonably related to preserving parental authority or adolescent health. But this is not the case that the clinics have made.

Part of the impact of the notice law that the clinics have either selectively ignored, misconstrued, or incompletely presented is revealed through the official demographic data of the Minnesota Department of Health on adolescent pregnancy, abortion, and childbirth. These data show that teenage pregnancy, abortion, and birth rates declined markedly between 1980-1986; teens who decided to abort were not unusually delayed from having abortions until later times of pregnancy that might increase the risk of abortion; and complications from abortions performed on teens did not increase relative to other age groups. In addition, a comparison of the pregnancy, abortion, and birth rates provides strong support for the conclusion that the notice law effectively caused a

decrease in the pregnancy rate. Between 1980-1986, the birth rate throughout Minnesota fell 12.5% for 10-17 year olds and 28.4% for 18-19 year olds, the abortion rate fell 27.4% for 10-17 year olds and 20.7% for 18-19 year olds, and the pregnancy rate fell 20.5% for 10-17 year olds and 25.4% for 18-19 year olds. Since it seems undisputed that the notice law directly decreased abortion rates, while birth rates simultaneously decreased, this strongly suggests that the law decreased abortion rates by affecting pregnancy rates. This supports the conclusion that the notice law in fact changed adolescent behavior. These data indicate that the notice law is reasonably related to Minnesota's compelling interest in preserving parental authority and adolescent health.

ARGUMENT

I. THE PEOPLE OF MINNESOTA HAVE A COMPELLING INTEREST IN HELPING PARENTS AND FAMILIES TO REDUCE TEENAGE PREGNANCY AND TEENAGE ABORTION.

This Court's decisions in *Roe v. Wade*, 410 U.S. 113 (1973), and *Planned Parenthood v. Danforth*, 428 U.S. 52 (1976), established a constitutional right to elective abortion for adolescent girls of any age that minors had not exercised at any time in the preceding history of this country. See Brief Amicus Curiae of the American Academy of Medical Ethics in Support of Cross-Petitioners in *Hodgson v. Minnesota*, No. 88-1126, 88-1309 at 2-23; Brief of Certain American State Legislators in Support of Appellants in *Webster v. Reproductive Health Services, Inc.*, No. 88-605. In the aftermath of those decisions, parents and public officials in every state have sought to adjust public policy on health care to take account of this new constitutional right while preserving other compelling, traditional social values. This Court has recently held that government has a "legitimate secular purpose" in reducing "the social and economic problems caused by

Alaska State Legislature

REPRESENTATIVE
PETER KELLY

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House Of Representatives

While in Juneau
State Capitol
Juneau, Alaska
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House District 31

MEMORANDUM

Date: February 11, 1997
To: House State Affairs Committee
From: Representative Pete Kelly
RE: Constitutionality of CSHB 37

During the testimony on CSHB 37 this morning the issue of constitutionality arose. It was said that although CSHB 37 conforms to the US Constitution, it violates Alaska's Constitution. I have attached two separate legal opinions addressing this issue. The opinions refer to SB 105, Sen. Leman's bill during the Nineteenth Alaska Legislature. The text of the bill is the same as CSHB 37 and the legal opinions still apply.

JEFFERY D. TROUTT
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2167
JUNEAU, ALASKA 99801

VOICE: (907)790-
FAX: (907)790-

TESTIMONY OF JEFFERY D. TROUTT CONCERNING SB 105

My name is Jeffery D. Troutt. I am a Juneau attorney in solo practice. I am here to speak to the constitutionality of SB 105 under the privacy clause of the Constitution of Alaska. SB 105 would prohibit physicians from performing abortions prior to obtaining the consent of parents, guardians, or the courts. I believe that this bill, if it becomes law, would pass muster under Alaska constitutional law, and the right to privacy enumerated in art. 1, § 22 of the Alaska Constitution, as currently interpreted by the Supreme Court of Alaska.

The right to privacy may best be described as "the right to be left alone". Both the federal and state constitutions give a measure of protection to the privacy of individuals. However, federal and state courts have been careful not to apply the right to privacy in a manner that restricts government from performing its essential functions or enforcing important public policies that may impinge on an individual's privacy.

FEDERAL PRIVACY LAW

The Constitution of the United States does not enumerate a right to privacy. The word "privacy" does not appear in the Constitution. However, the Supreme Court of the United States has found that a right to privacy exists in the Constitution, and derives from a broad reading of the due process clause of the 14th Amendment. *Carey v. Population*

Services International, 431 U.S. 478, 684, 97 S.Ct. 2010, 2015, 52 L.Ed.2d 675 (1977). The right has also been held to exist as a result of "emanations" from other constitutional provisions, e.g. *Griswold v. Connecticut*, 381 U.S. 479, 85 S.Ct. 1678, 14 L.Ed.2d 510 (1965). Governmental intrusions of privacy are allowed where there is a compelling state interest and that regulation does not sweep too broadly. *Id.*, at 381 U.S. 485, 85 S.Ct. 1682; *Roe v. Wade*, 410 U.S. 113, 115, 93 S.Ct. 705, 727, 35 L.Ed.2d 147 (1973); *Carey*, at 431 U.S. 685, 97 S.Ct. 2016.

ALASKA PRIVACY LAW

Unlike the federal constitution, the Alaska Constitution explicitly grants the right to privacy in Art. I, § 22. Alaska is one of a few states that have such a provision. The Supreme Court of Alaska has held that the state's right to privacy is broader than the right to privacy that the Supreme Court of the United States recognized in the cases cited above. *State v. Glass*, 583 P.2d 872, rehearing 596 P.2d 10 (Alaska 1978).

The court's analysis of privacy rights hinges upon an examination of the importance of the right claimed, and the government's interest in the action infringing upon privacy. The court has said:

Under the Alaska Constitution, the required level of justification turns on the precise nature of the privacy interest involved. In the absence of suspect classification or impairment of fundamental rights, we have required that there be a 'fair and

substantial relation' between the means chosen and a legitimate governmental purpose. *Isakson v. Richey*, 550 P.2d 359, 363 (Alaska 1976). Where fundamental rights are at stake, the state's interest in invading privacy must be compelling.

Matter of A.B., 791 P.2d 615, 621 (Alaska 1990).

The court has set limits to governmental invasion of privacy. "No governmental intrusion on the privacy of citizens should be broader or more intrusive than necessary to accomplish the government purpose that justifies it." *Municipality of Anchorage v. Ray*, 854 P.2d 740, 750 (Alaska 1993). Thus, the court will allow government to invade personal privacy, but it must do so only to the extent required to accomplish the legitimate governmental purpose.

The Supreme Court of Alaska reviewed the right to privacy as applied to a minor child in *Matter of A.B.*, 791 P.2d 615 (Alaska 1990). There, the court upheld the right of a parent to information held by HESS. The court recognized the preeminent importance of preserving the family structure, despite the father's admitted neglect and addiction to drugs, and the agency's expressed interest in preserving the privacy of certain information. The court stated that, to facilitate an expeditious and comprehensively monitored reunion of A.B. [a minor female] and her father, and to preserve the potential for a normal relationship between them, are legitimate State interests substantially effectuated by the release order [requiring the State to release information regarding the child to parties interested in the outcome of the case]." *Id.*, at 791 P.2d 622.

I have found one case where the court discusses the privacy interest of minors in preventing the disclosure of information about their obtaining an abortion. In *Falcon v. Alaska Public Offices Commission*, 570 P.2d 469 (Alaska 1977), the court prevented application state election law requiring a physician to disclose the names of patients from whom he had received over \$100 in payment. The court stated that a physician specializing in contraceptive or abortion services, or a general practitioner providing abortion or contraceptive services to a minor, should not be required to disclose the names of patients. This because the patients' privacy interests outweighed the public interest in promoting fair and honest government by requiring disclosure of a candidate's sources of income. *Falcon*, at 791 P.2d 622-623.

The *Falcon* case turned upon the potential public disclosure of information concerning intimate details of patients' lives. SB 105, on the other hand, deals only with private disclosure of information to parents concerning the health of minor children. As noted above, the court has recognized the importance of the parent/child relationship, and has been willing to sacrifice privacy interests in favor of supporting and maintaining that relationship. (Indeed, the court, while not deciding the constitutionality of similar provisions in the law, the court has displayed deference towards legislative policy in this area. See, e.g., *Cleveland v. Municipality of Anchorage*, 631 P.2d 1073 (Alaska 1981) and *Bird v. Municipality of Anchorage*, 787 P.2d 119 (Alaska 1990).)

Based upon the principles enumerated in the case law, I believe that the Supreme

Court of Alaska would hold that SB 105 does not violate the constitutional rights of minor children. Although the court may find that a fundamental right to abortion is implicated by the bill, see *Roe*, above, it would probably also find that there is a competing fundamental right of parents to be involved in decisions concerning minor children. See, *Matter of A.B.*, above.

In addition, as a matter of policy, the court would surely agree with the legislature that parents are more able than government to help minor children make a choice regarding abortion, and that it is in the best interests of minor children to have their parents involved in this decision.

Those rare instances where parental involvement would not be in a child's best interests are covered by the judicial by-pass allowing minors to obtain abortions against their parents' consent under certain circumstances. This will not only help the bill pass constitutional muster under federal law, it will likely persuade the Alaska court that the bill protects the privacy interests of minor children in the least obtrusive manner possible.

CONCLUSION

Abortion is a highly personal decision with profound moral, emotional, and spiritual ramification. I believe that the court would recognize that it is a decision that most minors should not make without involving the people best equipped to help them make that

decision, and most concerned for their welfare — the minor's parents. For this reason, and the reasons expressed above, I believe that it is likely that the Supreme Court of Alaska would hold that SB 105 is constitutional under the Constitution of Alaska.

MEMORANDUM

TO: Senator Loren Lehman
FROM: Kevin G. Clarkson *KC*
DATE: February 13, 1995
RE: Constitutional Limitations of Parental Consultation Requirements as a Precondition to Minor Abortions

INTRODUCTION

Pursuant to your request, I have reviewed the draft bill which you transmitted to me regarding parental notification, with an optional/alternative judicial bypass as a precondition to minor abortions in Alaska. I have also conducted legal research to determine, according to existing case law, what the constitutional limitations are for parental consultation requirements as a precondition for minor abortions. My legal research has included analysis of both the United States Constitution and the Alaska Constitution.

QUESTIONS PRESENTED

1. What are the permissible limits of a parental consultation requirement as a precondition to a minor's abortion under the United States Constitution?
2. What affect, if any, does Alaska's constitutional protection of the right to privacy have upon the enforceability of a parental consultation requirement as a precondition to a minor's abortion?

SHORT ANSWER

A one-parent consent requirement as a precondition to a minor's abortion is constitutionally permissible provided the statute contains an alternative judicial bypass procedure. To be constitutionally adequate, a judicial bypass procedure must allow the minor to obtain court

approval of her abortion decision without parental involvement if she can (1) show that she possess the maturity and information necessary to make her abortion decision, or (2) even if she cannot make the abortion decision by herself, that the desired abortion would be in her best interests. In addition, the judicial bypass procedure must ensure the minor's anonymity and must be conducted with expediency to allow the minor an effective opportunity to obtain the abortion. The Alaska Constitution's provision guarantying a right to privacy should not require a different conclusion.

DISCUSSION

I. Permissible Parental Consultation Provisions Under the United States Constitution

Pursuant to current law, an abortion regulation is unconstitutional only if it places an undue burden on the exercise of the woman's right to choose to have an abortion. Planned Parenthood v. Casey, ___ U.S. ___, 112 S. Ct. 2791, 2821 (1992). As the Court stated in Casey:

Regulations which do no more than create a structural mechanism by which the State, or the parent or guardian of a minor, may express profound respect for the life of the unborn are permitted, if they are not a substantial obstacle to the woman's exercise of the right to choose.... Unless it has that effect on the right of choice, a state measure designed to persuade her to choose childbirth over abortion will be upheld if reasonably related to that goal. Regulations designed to foster the health of a woman seeking an abortion are valid if they do not constitute an undue burden.

___ U.S. at ___, 112 S. Ct. at 2821. Therefore, a regulation that places a burden on the exercise of a woman's right to an abortion is constitutional unless the burden is "undue." The State may permissibly enact laws that are "calculated to inform the woman's free choice, not hinder it." Id. As stated plainly in Casey, regulations which do no more than create a structural mechanism by which the state, or the parent or the guardian of a minor, may express profound respect for the life of the unborn are permitted, if they are not a substantial obstacle to the woman's exercise of the right to choose. U.S. at ___, 112 S. Ct. at 2821. "As long as Casey remains authoritative, the constitutionality of an abortion regulation thus turns on an examination of the importance of the State's interest in the regulation and the severity of the burden that regulation imposes on the woman's right to seek an abortion." Barns v. State of Mississippi, 992 F.2d 1335, 1339 (5th Cir. 1993).

In the area of abortion rights, even prior to the Supreme Court's recent retreat in Casey, ___ U.S. at ___, 112 S. Ct. at 2821, from the landmark decision of Roe v. Wade, 410 U.S. 113, 93 S. Ct. 705 (1973), the Court ruled that it is constitutionally permissible for a state to require minor abortions to be conducted only after parental notification or parental consent has occurred, provided there exists acceptable judicial bypass alternatives. In Planned Parenthood of Central Missouri v. Danforth, the Court held that it is constitutionally impermissible for the state to place an absolute veto on a minor's abortion decision. See 428 U.S. 52, 74, 96 S. Ct.

2831, 2843 (1976) ("[T]he State may not impose a blanket provision . . . requiring the consent of a parent or person in local⁵ parentis as a condition for abortion of an unmarried minor during the first 12 weeks of her pregnancy [T]he State does not have the constitutional authority to give a third party an absolute, and possibly arbitrary, veto over the decision of the physician and his patient to terminate the pregnancy, regardless of the reason for withholding the consent."); Accord, City of Akron v. Akron Center for Reproductive Health, Inc., 462 U.S. 416, 439, 103 S. Ct. 2481, 2497 (1983) (Akron I). However, even prior to Casey, the Court upheld parental consultation statutes (both parental consent and parental notification statutes) which contain judicial bypass procedures satisfying the standards of Bellotti v. Baird. See Bellotti v. Beard, 443 U.S. 622, 640-42, 99 S. Ct. 3035, 3046-47 (1979) (the majority of the Court indicating that a two-parent consent requirement would be constitutionally permissible if coupled with an appropriate judicial bypass procedure); see also Akron I, 462 U.S. at 439, 103 S. Ct. at 2497 ("the State's interest in protecting immature minors will sustain a requirement of a consent substitute, either parental or judicial"); Planned Parenthood Association v. Ashcroft, 462 U.S. 476, 491, 103 S. Ct. 2517, 2525 (1983) (same). Most recently in Casey, after substantially retreating from Roe v. Wade, the Court specifically ruled that a one-parent consent requirement with an alternative judicial bypass procedure is constitutional:

Our cases establish, and we reaffirm today, that a State may require a minor seeking an abortion to obtain the consent of a parent or guardian, provided that there is an adequate judicial bypass procedure. See, e.g., Akron II, 497 U.S. at ___, 110 S. Ct. at ___; Hodgson, 497 U.S. at ___, 110 S. Ct. at ___, Akron I, supra, 462 U.S. at 440, 103 S. Ct. at 2497; Bellotti, supra, 443 U.S. at 643-644, 99 S. Ct. at 3048 (plurality opinion). Under these precedents, in our view, the one-parent consent requirement and judicial bypass procedure are constitutional.

___ U.S. at ___, 112 S. Ct. at 2832.

The judicial reasoning for upholding parental consent and parental notification requirements (with adequate judicial bypass procedures) finds its genesis in the Supreme Court's analysis of a child's limited rights and protections under the Constitution vis-a-vis an adult's rights and protections. For example, the Court has long recognized that "[a] child merely on account of his minority is not beyond the protection of the constitution." Bellotti v. Baird, 443 U.S. 622, 633, 99 S. Ct. 3035, 3043 (1979). As the Court ruled in In Re: Gault, 387 U.S. 1, 13, 87 S. Ct. 1428, 1436 (1967), "whatever may be their precise impact, neither the Fourteenth Amendment nor the Bill of Rights is for adults alone." Quoted in Bellotti, 443 U.S. at 633, 99 S. Ct. at 3043. Similarly, in Danforth, 428 U.S. at 74, 96 S. Ct. at 2843, the Court stated:

Constitutional rights do not mature and come into being magically only when one attains the state defined age of majority. Minors, as well as adults, are protected by the constitution and possess constitutional rights.

Simply observing that minors are protected by the Constitution, of course, is but the beginning of the analysis in determining what parental consent and/or parental notification

requirements the State can impose as a precondition to a minor's abortion decision. The Supreme Court has long recognized that the status of minors under the law is unique in many respects. As Justice Frankfurter aptly put it: "[C]hildren have a very special place in life which law should reflect. Legal theories and their phrasing in other cases readily lead to fallacious reasoning if uncritically transferred to determination of a state's duty towards children." May v. Anderson, 345 U.S. 528, 536, 73 S. Ct. 840, 844 (1953) (concurring opinion). Also, as Justice Powell put it in Bellotti, "[t]he unique role in our society of the family, the institution by which we inculcate and pass down many of our most cherished values, moral and cultural, . . . requires that constitutional principles be applied with sensitivity and flexibility to the special needs of parents and children." 443 U.S. at 634, 99 S. Ct. at 3035, quoting, Moore v. East Cleveland, 431 U.S. 494, 503-504, 97 S. Ct. 1932, 1938, 1977 (plurality opinion). Specifically, the Court has recognized three reasons which justify the conclusion that the constitutional rights of children cannot be equated with those of adults: The peculiar vulnerability of children; their inability to make critical decisions in an informed, mature manner, and the importance of the parental role in child rearing. Bellotti, 443 U.S. at 644, 99 S. Ct. at 3043. "[P]arent notice and consent are qualifications that typically may be imposed by the State on a minor's right to make important decisions. As immature minors often lack the ability to make fully informed choices that take account of both immediate and long-range consequences, a State reasonably may determine that parental consultation often is desirable and in the best interest of a minor." Bellotti, 443 U.S. at 640, 99 S. Ct. at 3046.¹ Each of these reasons have amplified significance in the case of a minor woman considering the dramatic decision of whether to abort her unborn child. See Id.; Casey, ___ U.S. at ___, 112 S. Ct. at 2832. Accordingly, the State may determine, as a general proposition, that such consultation is particularly desirable with respect to the abortion decision, as it is one that for some people raises profound moral and religious concerns. Moreover, it is widely demonstrated that parental involvement in a minor's abortion decision, if compassionate and supported, is highly desirable. See Bellotti, 443 U.S. 642, n. 20, 99 S. Ct. at 3047, n. 20.²

¹ In Danforth, 428 U.S. at 75, 96 S. Ct. 2844, the Court emphasized that its holding "[d]id not suggest that every minor, regardless of age or maturity, may give effective consent for termination of her pregnancy."

² The State's interest in a one-parent consent statute, such as Alaska's, is clear: it is to protect children from their own immaturity as well as from the possibly deficient advice of those whose business it is to provide abortions at profit. Such statutes are plainly constitutional provided they contain adequate judicial bypass provisions. Casey, ___ U.S. at ___, 112 S. Ct. at 2832; Ashcroft, 462 U.S. 476, 103 S. Ct. 2517. Ohio v. Akron Center for Reproductive Health (Akron II), 497 U.S. 502, 520, 110 S. Ct. 2972, 2984 (1990), Justice Kennedy eloquently expressed the interest of the State and the Family in requiring parental consent as a precondition to a minor's abortion:

It is both rational and fair for the State to conclude that, in most instances, the family will strive to give a lonely or even terrified minor advice that

In the abortion context, parental involvement statutes may be divided into four groups, in ascending order of the burden which they impose on the minor's exercise of her limited right to an abortion: One-parent notification statutes, two-parent notification statutes, one-parent consent statutes, and two-parent consent statutes. The Supreme Court upheld a one-parent notification statute in H.L. v. Matheson, 450 U.S. 398, 101 S. Ct. 1164 (1981). The Court upheld a two-parent notification statute that includes a judicial bypass provision in Hodgson v. Minnesota, 497 U.S. 417, 110 S. Ct. 2926 (1990) (Kennedy, J. plurality opinion).³ Finally, as stated above, the Court upheld a one-parent consent statute with a judicial bypass in both Casey, ___ U.S. at ___, 112 S. Ct. at 2832; and Ashcroft, 462 U.S. 476, 103 S. Ct. 2517. The only unanswered question, which at least arguably was answered in Bellotti v. Baird, is whether a two-parent consent statute with a judicial bypass impermissibly crosses the line so as to impose an undue burden on a minor woman's right to an abortion. See Casey, ___ U.S., 112 S. Ct. 2791.

In analyzing parental consultation statutes, the Court scrutinizes consent statutes more closely than it does notification statutes, and two-parent laws more closely than one-parent laws (simply because parental consent is viewed as being a greater burden on the right to choose an abortion from parental notification). Thus, a two-parent consent statute arguably raises more serious questions than the other parental involvement statutes. In Bellotti v. Baird, 443 U.S. at 636, 99 S. Ct. at 3045, a fractured court struck down a state law that required minors to obtain the consent of both parents before an abortion could be performed. The plurality opinion struck the law down on the grounds that the statute's judicial bypass provision was constitutionally inadequate. Bellotti, 443 U.S. at 645, 99 S. Ct. at 3049. However, the opinion clearly stated: "We are not persuaded that, as a general rule, the requirement of obtaining both parents' consent unconstitutionally burdens a minor's right to seek an abortion." Id. at 649, S. Ct. at 3051. In outlining the constitutional requirements for such a statute, the Court said: We therefore conclude that if the State decides to require a pregnant minor to obtain one or both parents' consent to an abortion, it also must provide an alternative procedure whereby authorization for the abortion can be obtained." Id. at 643, 99 U.S. at 3048 (emphasis added). Thus, if the two-parent consent statute at issue in Bellotti had contained an adequate judicial bypass, the four members of the plurality opinion stood ready to uphold it. A fifth, Justice White, was prepared

is both compassionate and mature. The statute in issue here is a rational way to further those ends. It would deny all dignity to the family to say that the State cannot take this reasonable step in regulating its health professions to insure that, in most cases, a young woman will receive guidance and understanding from a parent.

³ In Akron II, decided in tandem with Hodgson, the Supreme Court left open the precise question of whether parental notification statutes even require alternative judicial bypass provisions. 497 U.S. 502, 110 S. Ct. 2972.

to uphold the two-parent consent statute in Bellotti, even without a judicial bypass. Id. at 657, 99 S. Ct. at 3055 (White J., dissenting).

Although the Court in Bellotti did not uphold the two-parent consent statute at issue, it did indicate that it would do so under different circumstances. The indication given in Bellotti, that even a two-parent consent statute with an appropriate judicial bypass would be constitutionally permissible, is particularly persuasive in light of Justice Kennedy's plurality opinion in Hodgson, 497 U.S. at 498, 110 S. Ct. at 2970. There, Justice Kennedy relied on Bellotti to uphold a two-parent notice requirement. Justice Kennedy argued that since Bellotti approved a two-parent consent statute with a judicial bypass, it follows that the less onerous two-parent notice statute must be constitutional. Id. at 498, 110 S. Ct. at 2970. (Bellotti "requires us to sustain this statute before us here"). Justice O'Connor, also citing Bellotti, joined the plurality in Hodgson on the broad grounds that a bypass provision tailors "a parental-consent provision so as to avoid unduly burdening the minor's limited right to obtain an abortion." Id. at 461, 110 S. Ct. at 2950. (O'Connor, J., concurring). Thus, in Hodgson five justices (Rehnquist, White, O'Connor, Scalia, and Kennedy) viewed Bellotti, as settling the question in favor of the constitutionality of the two-parent consent/judicial bypass statute. See e.g., Barns, 992 F.2d at 1338-39.

For purposes of analyzing the constitutionality of the legislation which you propose to introduce to the Alaska Legislature, however, even if Bellotti is not directly controlling to approve a two-parent consent/judicial bypass statute, a one-parent consent statute (such as Alaska's current statute, AS 18.16.010 et. seq.) with a judicial bypass is unquestionably constitutional. See Casey, ___ U.S. at ___, 112 S. Ct. at 2832. The reason that a one-parent consent provision, with an adequate judicial bypass provision, is constitutional is because (1) the state is viewed as having an important interest at stake in encouraging or requiring parental involvement in a minor's abortion decision, and (2) the consent requirement, with an alternative judicial bypass, does not place an undue burden on the woman's right to choose an abortion. See Casey, ___ U.S. at ___, 112 S. Ct. at 2832.

The United States Supreme Court, and lower federal appellate courts, have both routinely recognized that the State does have an important interest at stake in parental involvement statutes. The State's interest, in part, is insuring that someone other than the immature minor and the abortion provider has a hand in making an important decision that fundamentally affects the minor's health and welfare. The Supreme Court has recognized that "the guiding role of parents in the upbringing of their children justifies limitations on the freedom of minors. Bellotti, 443 U.S. at 637, 99 S. Ct. at 3045. The Supreme Court has described the "belief that the parental role implies a substantial measure of authority over ones children" as being "deeply rooted in our nation's history and tradition." Id. at 638, 99 S. Ct. at 3045. "Legal restrictions on minors especially those supported by the parental role, may be important to the child's chances for the full growth and maturity that make eventual participation in our free society meaningful and rewarding. Id. at 638-39, 99 S. Ct. at 3046. Parental consultation is particularly important on the abortion decision. "one that for some people raises profound moral and religious concerns." Id. at 640, 99 S. Ct. at 3047. The child herself may be too immature

to make the decision. And the abortion provider cannot be counted on to provide "adequate counsel and support . . . at an abortion clinic, where abortions for pregnant minors frequently take place." Id. at 641, 99 S. Ct. at 3047.

The remaining consideration involves a determination of what constitutes an adequate judicial bypass procedure. Bellotti establishes four criteria which must be satisfied in any judicial bypass procedure:

1. The procedure must allow the minor to show that she possesses the maturity and information to make her abortion decision, and in consultation with her physician, without regard to her parents' wishes;
2. The procedure must allow the minor to show that, even if she cannot make the abortion decision by herself, the desired abortion would be in her best interest;
3. The procedure must insure the minor's anonymity; and
4. The Courts must conduct a bypass procedure with expediency to allow the minor an effective opportunity to obtain an abortion.

443 U.S. at 643-44, 99 S. Ct. at 3048; accord Akron II, ___ U.S. ___, 110 S. Ct. at 2979-80.⁴

With respect to the first Bellotti requirement, the Supreme Court has ruled that every minor must have the opportunity, if she so desires, to go directly to a Court to request judicial approval of her abortion decision without first consulting or notifying her parents. If the minor satisfies the Court that she is mature and well enough informed to intelligently make the abortion decision on her own, the Court must authorize her to act without parent consultation or consent. If the minor fails to satisfy the Court that she is mature or competent enough to make the

⁴ Justice Powell stated specifically in Bellotti that: "A pregnant minor is entitled in such a proceeding to show either: (1) that she is mature enough and well enough informed to make her abortion decision, in consultation with her physician, independently of her parents' wishes; or (2) that even if she is not able to make this decision independently, the desired abortion would be in her best interest. The proceeding in which this showing is made must assure that a resolution of the issue, and any appeals that may follow, will be completed with anonymity and sufficient expedition to provide an effective opportunity for an abortion to be obtained. In sum, the procedure must insure that the provision requiring parental consent does not in fact amount to the absolute, and possibly arbitrary, veto that was found impermissible in Danforth." 443 U.S. at 644, 99 S. Ct. at 3048.

abortion decision independently, she must be permitted to show that an abortion, nevertheless, would be in her best interest. This leads, in essence, to the second Bellotti requirement.

With respect to the second Bellotti requirement, the Supreme Court has recognized that there is an important State interest in encouraging a family rather than a judicial resolution of a minor's abortion decision. Furthermore, the Court has observed that parents naturally take an interest in the welfare of their children, an interest that is particularly strong where a normal family relationship exists and where the child is living with one or both of the parents. With respect to the second Bellotti criteria, the Court's independent determination of whether an abortion is in the best interest of the minor child regardless of her immaturity or lack of information, the Supreme Court has specifically ruled that it is proper for a Court to take into account the importance of family involvement in such an important decision for the minor. Under the second Bellotti criteria if, all things considered, the Court determines that an abortion is in the minor's best interest, she is entitled to Court authorization without any parental involvement." However, the Supreme Court has indicated that a Court may deny the abortion request of an immature minor in the absence of parental consultation if it concludes that her best interests would be served through parental consultation. It is also permissible, in such a case, for the Court to defer its decision until there is parental consultation in which the Court may participate. According to the Supreme Court in Bellotti, "this is the full extent in which parental involvement may be required." 443 U.S. at 648, 99 S. Ct. at 3051.

II. Alaska's Constitutional Right to Privacy.

In Breese v. Smith, 501 P.2d 159 (Alaska 1972), the Alaska Supreme Court stated the tests which are to be applied when a claim is made that state action encroaches upon an individual's constitution rights. In Breese, the Court had before it a "ha' length" regulation which encroached on what the Court determined to be the individual's fundamental right to determine his own personal appearance. In that case, the Court stated:

Once a fundament right under the Constitution of Alaska has been shown to be involved and it has been further shown that this constitutionally protected right has been impaired by governmental action, then the government must come forward and meet its substantial burden of establishing that the abridgement in question was justified by a compelling government interest.

501 P.2d at 171.⁵ This standard, established in Breese, is similar to the federal protection for the U.S. Constitutional Implied Right of Privacy existing prior to Casey, ___ U.S. ___ 112 S. Ct. at 2821.

⁵ See also State v. ... 16 P.2d 142 (Alaska 1973); State v. Van Dort, 502 P.2d 453 (Alaska 1972); State v. ... State, 525 P.2d 524, 527 (Alaska 1974); Gilbert v. State, 526 P.2d 1131, 1133 (Alaska 1974); State v. Adams, 522 P.2d 1125 (Alaska 1974).

In 1972, the Alaska Constitution was amended to add Article I, § 22, which states an express right of privacy to Alaska citizens. Article I, § 22 reads:

The right of the people to privacy is recognized and shall not be infringed.
The legislature shall implement this section.

In Ravin v. State, 537 P.2d 494 (Alaska 1975), the Alaska Supreme Court ruled that "[t]he effect of this amendment is to place privacy among the specifically enumerated rights in Alaska's Constitution." Accordingly, in Ravin, the Alaska Supreme Court determined that the right of privacy guaranteed by Article I, § 22 of the Alaska Constitution is a fundamental right which can only be infringed by the state upon a showing of a compelling government interest. Although in Ravin the Alaska Court determined that private marijuana use outside the home did not fall within the scope of the privacy interests protected by Article I, § 22, there is little doubt that the Alaska Supreme Court, consistent with the United States Supreme Court's decision in Roe v. Wade, would determine that the right of a woman to choose to have an abortion is a privacy right protected by Article I, § 22. As a result, there is little doubt that the Alaska Supreme Court would recognize a woman's right to choose to have an abortion as a fundamental right protected by the Alaska Constitution, principally Article I, § 22.

Since 1975, the Alaska Supreme Court has consistently ruled that the government must demonstrate a convincing and compelling interest, which the government must seek to implement through the least restrictive means available, in order to justify infringement upon the fundamental right to privacy guaranteed by Article I, § 22, of the Alaska Constitution. For example, In Matter of A.B., 791 P.2d 615 (Alaska 1990), the Alaska Court ruled as follows:

Although neither federal nor state rights of privacy are absolute, it is part of the judicial function to insure the governmental infringements of privacy are supported by sufficient justification. Under federal precedent, it must be found that the privacy invasion is necessary to a compelling state interest, and that the government regulation does not sweep too broadly.

See, e.g., Griswold, 381 U.S. at 485, 85 S. Ct. at 1682; Roe v. Wade, 410 U.S. 113, 155, 93 S. Ct. 705, 727, 35 L. Ed. 2d 147 (1973); Carey, 431 U.S. at 687, 97 S. Ct. at 2016. Under the Alaska Constitution, the required level of justification turns on the precise nature of the privacy interest involved. In absence of a suspect classification or impairment of a fundamental right, we have required that there be a fair and substantial relation between the means chosen for a legitimate governmental purpose. Issakson v. Rickey, 550 P.2d 359, 363 (Alaska 1976). Where fundamental rights are at stake, the State's interest invading privacy must be compelling. Id. Thus, to determine the validity of the release work, we must consider both the nature and the extent of the privacy invasion, and the strength of the State interest or requiring disclosure. See

generally Falcon v. Alaska Public Offices Commission, 570 P.2d 469,
475 (Alaska 1977).

Id. at 621. Accord Luedtke v. Nabors Alaska Drilling, Inc., 768 P.2d 1123, 1129 (Alaska 1989).

Consistent with the United States Supreme Court precedent addressed above, it should be recognized by the Alaska Supreme Court that the State has a compelling interest to insure the protection of minor children in the context of their making important decisions, such as the decision to abort an unborn child. The key to guaranteeing the enforceability of a parental consent statute under Alaska's Constitutional Privacy Provision, therefore, would seem to be in drafting the parental consent provisions so as to implement the state's compelling interest in the least restrictive means possible to the minor woman's right to choose. Including within your proposed legislation, a judicial bypass procedure which is consistent with U.S. Supreme Court precedent as detailed above, would implement the State's compelling interest in the least restrictive means possible.

CONCLUSION

A one-parent consent requirement as a precondition to a minor's abortion is constitutionally permissible provided the statute contains an alternate judicial bypass procedure. To be constitutionally adequate, a judicial bypass procedure must allow the minor to obtain court approval of her abortion decision, independent of her parent's involvement, upon a showing that either (1) she is independently mature and informed enough to make her own abortion decision, or (2) that the abortion is otherwise in her best interests. The procedure must be conducted expediently and so as to preserve the minor's anonymity. Examples of statutes from other states are enclosed as is a redrafted proposed bill.

STATE OF ALASKA
HOUSE OF REPRESENTATIVES

STATE AFFAIRS COMMITTEE
Representative Jeannette James, Chair



Room 102, Capitol Building, Juneau

Phone 465-3743, FAX 465-2381

Monday, February 10, 1997

A handwritten signature in black ink, consisting of several loops and a long vertical stroke.

**Please add the attached letters
to your State Affairs notebook
on House Bill 37,**

**Parental Consent Before Minor's
Abortion.**



February 3, 1997

Representative Jeannette James
716 West 4th Avenue
Anchorage, Alaska 99501

Dear Representative James:

As Medical Director of Alaska Women's Health Services, I am very concerned about SB-24 and HB-37. I would like to tell you the real life implications of this proposed legislation. Both of these bills deal with obtaining parental consent or judicial bypass in order for a person under the age of 18 or 16 years old to have an abortion. This legislation would be bad law for a number of reasons. I have been doing abortions in Alaska for approximately 13 years, and what is clear to me is that teenagers often have a difficult time trying to bring up their pregnancy to their parents and at the time that they choose to have an abortion, they have sometimes reached a relatively advanced gestation. This delay makes the procedure more dangerous to them and, with Valley Hospital's ability to do second trimester abortions being challenged, may place them in a point in gestation when abortion services are not acceptable to them.

In addition to having difficulties bringing these issues up with their parents, teenagers are absolutely intimidated by having to ask for judicial bypass. My experience is that even for parents who have good relationships with their teenagers, bringing up the concept of abortion is quite difficult. This bill will place a significant impediment in front of these teenagers, will prevent them from getting information they need in a timely manner, and ultimately lead to more dangerous abortions in this age group and an increase in unplanned, unintended, and unwanted pregnancies.

If all families were perfect working units and all parents were supportive of their children in issues regarding teenage pregnancy, such laws would make sense. However, the reality of life is that there are many dysfunctional families, and for the teenagers who are in dysfunctional families this impediment may be insurmountable to many of them.

Thank you for taking the time to read this letter. I am available to answer any questions you have about this issue and can supply data from the Centers for Disease Control, which you may find useful. As written, this legislation puts teenagers in our State at unnecessary and increased risk. Thank you for your time.

Sincerely,

Jan Whitefield, M.D., Ph.D.
Medical Director, Alaska Women's Health Services.

JW:FasType.jlb

Alaska Women's Lobby
P.O. Box 210685 Anchorage 99521
211 Fourth Street Juneau #108 99801
586-1107
fax: 586-1097

POSITION PAPER

HB 37: Parental Consent Before Minor's Abortion

The Alaska Women's Lobby is a statewide advocacy organization representing thousands of Alaskans working toward expanded opportunities, equal access, and enhanced representation for women. The Lobby is supported solely by contributions.

The Alaska Women's Lobby opposes House Bill 37. We wholeheartedly encourage open and honest communication between parents and their children, and support efforts to prevent teenage pregnancy. We don't believe, however, that HB 37 will accomplish either of those goals.

HB 37 places an untenable judicial burden on young women who, by virtue of their situation, are already facing difficult decisions. By requiring a teenager to seek judicial redress, HB 37 assumes that young women in these situations not only have the resources to seek but also the access to obtain such redress.

In its 1992 decision in Planned Parenthood of Southeastern Pennsylvania v. Casey, the U.S. Supreme Court made it clear that states may not veto a woman's decision to terminate her pregnancy, but that states could impose restrictions so long as those restrictions don't have the "purpose or effect of placing a substantial obstacle in the path of a woman seeking an abortion." By requiring young Alaskan women to obtain judicial approval in order to terminate a pregnancy, HB 37 creates just the kind of "substantial obstacle" the U.S. Supreme Court decision prohibits.

HB 37 will not reduce the rate of teenage pregnancy, encourage teens to talk to their parents, or transform dysfunctional families into stable ones. It will force teens to take unwanted pregnancies to term, to have illegal abortions, or face the results of exacerbating an already troubled or dangerous home life.

The thousands of Alaskans represented by the Alaska Women's Lobby oppose HB 37.



NATIONAL ASSOCIATION OF SOCIAL WORKERS
ALASKA CHAPTER

525 Main Street, Juneau AK 99801
586-4438 1-800-478-6279 Fax: 586-4439
naswak@alaska.net

Testimony Regarding

HB 37 - PARENTAL CONSENT FOR ABORTION

Before the
STATE AFFAIRS COMMITTEE
ALASKA HOUSE OF REPRESENTATIVES
February 6, 1997

Presented by
Angela M. Salerno, ACSW
Executive Director,
National Association of Social Workers Alaska Chapter



ALASKA CHAPTER

NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

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The National Association of Social Workers (NASW) is the world's largest organization of professional social workers. NASW's 155,000 members nationwide and 460 in Alaska work in a wide range of settings at all levels in the public and private sectors. Professional social workers focus on vulnerable populations and promote state and federal policies which enhance the lives of the people we serve.

Thank you for the opportunity to address the Committee on HB 37 - Parental Consent for Abortion.

NASW opposes HB 37 and does not recommend its passage.

A pregnant woman's constitutional right to choose between childbirth and abortion was established in 1973 by the Supreme Court's landmark ruling in *Roe V. Wade*. All women, including those under 18, are entitled to a safe, legal abortion.

Of the more than one million teenage pregnancies that occur in the United States each year, over 80 percent are unintended. Nearly all pregnant teens are unwed, and some 40% of them choose abortion. The bill before you will require that young women seeking to terminate an unwanted pregnancy receive the permission of parents, guardians or the court before receiving a safe, legal abortion.

This proposal will not act to promote desirable parental consultation. Ideally, a teenager should be able to tell her parents about her pregnancy, obtain their love and support and arrive at critical decisions about her future through family discussions. In fact, the majority of pregnant teenagers do tell at least one parent about their pregnancies. Based on a national survey of more than 1,600 unmarried minors having abortions in states without parental consent laws, 61% discussed the decision to have an abortion with at least one of their parents. The younger the minor, the more likely she was to have voluntarily discussed the abortion with her parents.

Parental involvement laws do not strengthen family relationships. The need to reinforce family relationships is the reason most often cited to justify state laws requiring parental consent before abortion. But such laws are unnecessary for stable and supportive families, and they are ineffective and cruel for unstable, troubled families. Some teenagers cannot tell their parents. Some are victims of incest or other forms of family violence - one study showed that 14% of minors having abortions believed that, if forced to tell their parents about their pregnancies, they would face physical abuse, and 11% feared violence between their parents. Mandatory parental consent cannot transform abusive families into supportive ones.

Mandating parental involvement poses health risks to teenagers. Young women already are more likely than older women to have later abortions, and parental involvement laws only cause further delays either because of fears of telling their parents or because of the inevitable delays in going to court for a judicial bypass hearing. While abortion at all stages of pregnancy is safer than childbirth, the risk of major complications increases 15 - 30% per week. Statistics compiled by the Federal Centers for Disease Control indicate that the risk of death from childbirth is, on average, 24 times higher than the risk of death from abortion up to 12 weeks of pregnancy. Following enactment of Minnesota's parental notification laws, second-trimester abortions among minors increased by 18%. Minors who cannot obtain an abortion in their small towns or villages must travel to other sites to have the procedure, are forced to carry their pregnancies to term, or resort to illegal abortion. Under Minnesota notification statute, the birth rate in Minneapolis for 15 -17 year olds rose 38%. The American Medical Association has long recognized that parental notification and consent requirements deter minors from seeking necessary health care. The desire to maintain secrecy has been one of the leading reasons for illegal abortion deaths since the Supreme Court recognized the constitutional right to abortion in 1973. Further, the AMA believes some minors may be physically or emotionally harmed if required to involve a parent in the abortion decision.

Teenagers faced with the choice between childbirth and abortion can make a responsible decision without parents or courts. The American Psychological Association has found that minors are usually able to make intelligent, informed decisions about pregnancy. Even young women from severely troubled families often show great maturity and sensitivity when seeking confidential birth services.

A judicial bypass option is inadequate and discriminatory in Alaska. Young women using this procedure often experience fear, anxiety and shame as they are forced to reveal detail of their private lives to strangers in the courtroom. Mandatory representation by the currently overburdened Office of Public Advocacy will surely result in delays or inadequate representation. In rural Alaska, confidentiality will be severely compromised as a young woman will most likely be recognized by the judge or other court personnel.

In Alaska, the courts are moving toward assigning teenagers greater responsibility for their actions, not imposing further restrictions. During the last legislative session lawmakers were successful in passing laws to treat certain juvenile offenders as adults. In the 20th Legislature, bills have been introduced to remove the protections of immaturity from teenagers who commit minor offenses. It is unfair to treat pregnant teens differently with proposals to strip personal responsibility in decisions about reproductive matters.

Parental consent laws are an unconstitutional attack on a women's right to abortion, and in Alaska, on an individual's right to privacy. *Roe v. Wade* entitled all women to legal, safe abortion. Parental consent as well as other provisions of SB 24 such as the creation of civil liability for performing abortion, are barriers manufactured to interfere with this constitutional guarantee. Should this bill become law in Alaska, there will most certainly be court challenges, as the Constitution of the State of Alaska specifically guarantees each citizen the right to privacy.

While NASW supports strong families and believes that parents have profound interests in their children's well-being, in the case of pregnancy, a teenager's privacy rights must be paramount. Courts have found that teenagers who want to keep their pregnancies a secret almost always have sound reasons. When there is a reason to expect an extremely abusive parental reaction to a young woman's unplanned pregnancy, her right to privacy must come first since she is in the best position to know whether or not she is in danger. A legislature that is unfamiliar with a young woman's particular situation is not in a position to force her to involve her parents. Where abortion is concerned, privacy can be a life or death matter for teenagers.

In acknowledging and affirming the social work profession's commitment to respecting diverse value systems in a pluralistic society, we recognize that the issue of abortion is controversial because it reflects the different value systems of different groups. Consequently, NASW does not take a position concerning the morality or immorality of abortion.

NASW's position concerning abortion services is based on the principle of self-determination. Every individual must be free to participate or not participate in abortion services. In the event that a woman choose abortion the following services should be available to her:

- *counseling and referral provided by professionally trained staff who are knowledgeable of the social and psychological dynamics of unwanted pregnancy and abortion*
- *safe surgical care, including pre- and post-operative services*
- *counseling regarding the use of contraception and the prevention of unwanted pregnancies*
- *provision of appropriate contraceptive devices. These devices should be available to all women.*



NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

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FACTS ON ABORTION

Safety of Abortion

- 97% of women who obtain abortions before 13 weeks of pregnancy report no complications. (American Medical Association Council Report, *Induced Termination of Pregnancy Before and After Roe v. Wade*, 1992).
- Abortion is 11 times safer than carrying a pregnancy to term. (Gold, R. B, *Abortion and Women's Health: A Turning Point for America?*, 1990).
- Teenage girls are more than 24 times more likely to die from childbirth than from a first trimester, legal abortion. (Ory, H W, "Mortality Associated with Fertility and Fertility Control," *Family Planning Perspectives*, vol. 15, no. 2).
- Of the 3.4 million woman who become pregnant unintentionally in the U.S. each year, approximately 1.6 million terminate their pregnancies by medically safe, legal abortion. (Gold, R. B, *Abortion and Women's Health: A Turning Point for America?*, 1990).

Health Risks to Women

- Legislation mandating parental involvement in decisions about abortion does **increase the risk of harm to the adolescent** by delaying access to appropriate medical care. (American Academy of Pediatrics, Committee on Adolescence, "The Adolescent's Right to Confidential Care When Considering Abortion," *Pediatrics*, vol. 97, no 3).
- Complication rates increase for abortions performed between 13 and 24 weeks. (American Medical Association Council Report, *Induced Termination of Pregnancy Before and After Roe v. Wade*, 1992).
- The American Medical Association noted that "because the need for privacy may be compelling, minors may be driven to desperate measures to maintain the confidentiality of their pregnancies. They may run away from home, obtain a "back alley" abortion, or resort to self-induced abortion. The desire to maintain secrecy has been **one of the leading reasons for illegal abortion deaths since...1973.** (AMA, "Mandatory Parental Consent," 83.).

Possible Links Between Abortion and Breast Cancer

- Only about 20 studies have examined the risk of developing breast cancer for women who have had abortions. (National Women's Health Network Fact Sheet: "*Abortion and Breast Cancer: The Unproven Link.*" January, 1994).

- Cancer researchers at the **National Cancer Institute**, the **American Cancer Society**, and major universities say that the most reliable studies show no increased risk, and they call the entire body of research inconclusive.
- **Harvard School of Public Health** researchers concluded in the January issue of *Cancer Causes and Control*, that abortion does not appreciably increase or decrease a woman's risk for breast cancer.

Long-Term Effects of Abortion

- Anti-choice groups are circulating unfounded claims that a majority of American women who choose to terminate their pregnancies suffer severe and long-lasting emotional trauma as a result. They call this largely nonexistent phenomenon "post-abortion trauma," or "post-abortion syndrome." They hope that terms like these will gain wide currency and credibility despite the fact that **neither the American Psychological Association nor the American Psychiatric Association recognizes their existence.**
- For most women who have had abortions, the procedure represents a maturing experience, a successful coping with a personal crisis situation. In fact, **the most prominent emotional response of most women to first-trimester abortion is relief.** (Zabin, L.S. et al. "When Urban Adolescents Choose Abortion: Effects on Education, Psychological Status and Subsequent Pregnancy." *Family Planning Perspectives*, 21(6), Nov/Dec 1989; Adler, N. et al. "Psychological Responses After Abortion." *Science*, April 6, 1990; Lazarus, A. "Psychiatric Sequelae of Legalized Elective First Trimester Abortion." *Journal of Psychosomatic Obstetrics & Gynecology*, 43(3), September 1985; Russo, N.F. and Zierk, K.L. "Abortion, Childbearing, and Women's Well-Being." *Professional Psychology: Research and Practice*, 23(4), 1992; Armsworth, M.W. "Psychological Response to Abortion." *Journal of Counseling and Development*, 69, March/April 1991.)
- A study of a group of teenage black women who obtained pregnancy tests at one of two Baltimore clinics found that the young women who choose to have abortions **were more likely to graduate from high school** than those of similar socioeconomic status who carried their pregnancies to term or who were not pregnant. They showed no greater levels of stress at the time of the pregnancy and abortion and no greater rate of psychological problems two years after the abortion that did the other women. (Zabin, L.S. et al. "When Urban Adolescents Choose Abortion: Effects on Education, Psychological Status and Subsequent Pregnancy." *Family Planning Perspectives*, 21(6)).
- Up to 98% of the women who have abortions **have no regrets and would make the same choice again** in similar circumstances. (Dagg, P.K.B., MD "The Psychological Sequelae of Therapeutic Abortion - Denied and Completed." *American Journal of Psychiatry*, 148(5), May 1991).
- In July 1987, President Ronald Regan directed Surgeon General C. Everett Koop to provide the administration with a report on the health effects of induced abortion. In a letter to the president dated January 8, 1989, Dr. Koop stated that he could not form a conclusion with the available data. (Koop, C. Everett, letter to President Regan, January 9, 1989. Reproduced in "A Measured Response: Koop on Abortion," *Family Planning Perspectives*, 21(1), Jan/Feb, 1989.
- In a 1988 closed meeting, Surgeon General Koop told representatives from several anti-abortion organizations that the risk of **significant emotional problems following abortion was "minuscule"** from a public health perspective. (House Committee on Government Operations. "The Federal Role

in Determining the Medical and Psychological Impact of Abortions on Women, H.R. Rep. No. 329, 101st Congress, 2d Sess. 14 (1989)).

- In 1989, a panel of experts assembled by the American Psychological Association concluded unanimously that legal abortion **“does not create psychological hazards for most women undergoing the procedure.”** The panel noted that, since approximately 21% of all U.S. women have had an abortion, if severe emotional reactions were common there would be an epidemic of women seeking psychological treatment. There is no evidence of such an epidemic. (Adler, N., University of California at San Francisco, statement on behalf of the American Psychological Association before the Human Resources and Intergovernmental Relations Subcommittee of the Committee on Government Operations, U.S. House of Representatives, March 16, 1989.)

Regarding Senate Bill No. 24

Regarding House Bill No. 37

January 31, 1997

February 6, 1997

My name is Sharylee Zachary,

My husband, Dan, and I have 3 wonderful daughters ages 11, 9, and 7. We are working hard and faithfully at instilling in them high moral values and standards to live by. For every action, there is a consequence and you should own up to those actions and consequences and not blame them on anyone else. No one else should pay the price for your consequences. But also, we stand together as a family to work through the happenings and consequences of our actions. We learn from them, deal with them, encourage each other to make wiser decisions the next time. We are teaching our children to be responsible and to look out for the welfare of those around them.

High on our list is to teach them the great value and sanctity of human life, a precious life that God has given to every conceived baby, whether that baby is two cells or full term. Ideally, we live our life so that a baby is conceived within the bonds of a love relationship between a husband and wife and we do not have sex until marriage. We believe in the preservation of the family unit.

I realize that one of the main reasons this bill has come about is because a lot of people don't feel this way and are not living their lives in this manner and are not teaching these truths to their children. Instead of living according to absolute moral values, they live by their 'feelings' and their 'right' as an American citizen to do what they please. The consequences have been disastrous to our nation. There is now a huge number of broken families, single parent families where there was never a marriage or commitment (just 'feelings'), and a huge abortion rate where the 'consequences' of peoples 'feelings', the resulting babies, are being slaughtered. We have a multitude of fatherless families living in poverty; crime is running rampant, -children are joining 'gangs' in order to find security and a 'family' feeling. The effects of the misuse of drugs and alcohol are running rampant. You are quite aware of all this, I know.

I also realize that another main reason this bill has come about is because of the pregnancy consequences women end up with because of the abuse they have suffered at the hand of some man (men) (which can take many forms). My heart aches for these women. And I am very sorry that our society has given them the message that the only way out is by handing down a death sentence to their unborn child.

I am grateful that this bill is designed to decisively recognize the rights of the family and the parents to support their children through such crisis and to guide them in making wise sions.

Unfortunately, few people are taking appropriate responsibility for the consequences of their actions. For years, now, around the country children are being educated that, 'You

are going to have sex anyway so use condoms, they will protect you from disease and pregnancy'. Well, that does not work. Instead, we need to plant seeds in the children that they have the ability to live an abstinent lifestyle (which is the only true means of birth control and disease prevention) and still be happy and content. Then we need to raise up support groups to encourage that type of responsible behavior. Our children are told that if they get pregnant, the only way out is abortion. "And, by the way, lets keep it a secret from your parents, we will provide all you need to get the abortion." (Who usually pays for the medical costs as the result of the abortion? - the parents, not the clinic that botched th'ngs up!)

Talk about driving a major wedge in the parent/child relationship!!! Parents are not even given a chance to help their child through the crisis. If one of our daughters were to become pregnant, we would support her through the pregnancy, and help her make the wisest decision for her and her baby as far as keeping her baby or adoption into a healthy, loving family. It is unfortunate that everywhere you go there are people and resources outside the family who are filling our children with those types of lies.

Please continue to encourage the ability and right of the parents and families to support our children in times of crisis.

I realize that there are those parents who are currently abusing their children and would continue to treat their children badly (or worse) upon hearing the news of an unwanted pregnancy. And there are cases of incest and rape where people feel this is the time for an abortion. My husband and I, and hundreds of thousands of folks like us, are not ignorant nor cold-hearted toward the plight of these unfortunate children. But we do believe that if a baby is on the way, that viable life has a right to be born. Communities do need to support the mother through the pregnancy and onto a healthier life style. There also needs to be community help for the fathers to take on their responsibility for their actions, - they need support groups to help them, also. They should not be ignored. Many of them have had no positive role models to show them the way toward responsible behavior toward those around them, - as well as toward themselves. It is also really 'key' that Churches, once again, are allowed back into the arena of helping folks get their life in shape.

Please continue to work for legislation that does not allow for the breakdown of our families and our nation.

Two questions:

1) If this legislation does not pass, what provisions can be done for the family whose daughter, unknown to them, has had an abortion and is living through the emotional scars of that procedure, the emotional scars of the unwanted pregnancy and often the accompanied abandonment by the father, etc., - - there is something wrong with their daughter, and they don't have a chance to help her through it because they don't even know about it?

2) I have met several adult women who, while in their teens, were forced by their parents to have an abortion, - against their will, and they are still carrying the emotional (and some physical) scars this produced in their lives. Is there legislation to safeguard children against this type of abuse?

Alaska has made many wise pro-family, pro-nation choices in it's laws and I am very proud of that.

Alaska has to stand strong, not to go the route of many of the lower-48 states that are falling apart because of their unwise, anti-family choices in their living styles and laws.

Alaska needs to be the North Star state pointing the way to strong families, strong communities, strong states, and a strong nation founded and built on absolute values and taking responsibility for personal actions and the consequences thereof so that the innocent no longer suffer.

Very Sincerely and Respectfully,

Sharylee Zachary
Box 1531
Petersburg,AK 99833
(907) 772-3681

ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the HOUSE STATE AFFAIRS committee on HB 37 dated 2-11-97 teleconference.

My name is Ruth Ewig and I reside at 2325-30th Avenue. I am in complete support of HB37 and do commend Representative Peter Kelly and all the other pro-family legislators down in Juneau, on their continuing courage in support of the stable, traditional family.

In talking with my sixteen year old son, he shook his head, and expressed how ridiculous it is that abortions are possible without the parents involved or consenting.

HB37 is a bill of compassion, love, and protection for our youth, minors who by law are under parental guardianship, guidance, protection, and training. Abortion procedures vary but have included being hooked up to an IV at times. This can be quite traumatic if a teen is getting the abortion alone without support or input from loved ones. The post-abortion syndrome including depression, suicidal tendencies, and dysfunction for most of the rest of those teens' lives is very real and supported by statistics.

The argument that HB37 violates privacy is not applicable where greater harm results because of it, such as destroying a baby in the womb, the devastating isolation a teenage girl may subject herself to out of shame, which leads to disorders and death. Privacy does not mean undermining legal guardians, the parents, by performing abortions behind their backs, out of their control, and influence. Constitutionally, laws are put into place relative to others so that we may live together in a civilized society. Intimidation by special interests such as the Colorado attorney who testified threatening to sue the state if HB37 passes the legislature, should not be allowed to destroy and interfere with a greater good served by this bill, protection of the family unit. I would be interested in her money source enables her to file suit. Is this the notorious ACLU that is government-funded?

What an embarrassment it is that an ambulance service seeks parental consent before treating a minor, a parent must give permission for minors to have their ears pierced or get prescription medicines, but parental permission is not required to be informed by a doctor about serious surgery like abortion with its traumatic pre-syndrome and post-syndrome complications.

Vote YES for HB37, it is the only reasonable solution. I would like to be personally informed about the vote and results of this at every level. I have personal experience with the devastation and emotional impairment I have suffered in the wake of an abortion 24 years ago. I am in full agreement with the penalties which will result if a doctor recklessly performs an abortion without parental consent.

Sincerely yours,
Ruth Ewig

2325-30th Avenue
Fairbanks, Alaska 99701

(Fairbanks, AK.)
Phone/Fax: 452-5338

Regarding Senate Bill No. 24
Regarding House Bill No. 37

Wednesday, February 12, 1997
Thursday, February 13, 1997

"Parental Consent of Minors Seeking Abortion"

My name is Sharylee Zachary,

My husband, Dan, and I have 3 daughters, ages 7, 9, & 11.

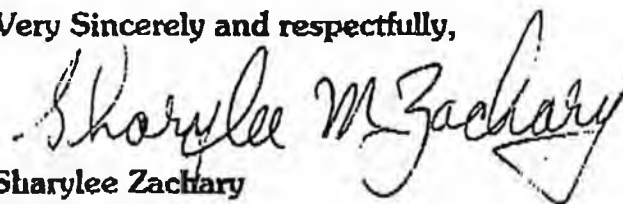
We have already sent in written and oral testimony regarding our concerns about this vital issue of parental rights in guiding the health care of our children and medical procedures performed on them, - especially when done without our knowledge. So I will keep this short.

It is important that our Alaskan laws are so designed as to strengthen the family unit and make it possible for the family to work through problems and crisis together. It is neither beneficial to the family nor to Alaska to allow for a situation in which people outside of the family step in-between the parent and child when a child is faced with a situation as serious as a pregnancy. This type of situation allows others to convince the child to keep secrets from their family and allows others to tell the child that they will help them out of the situation, which, - in this case results in the death of a viable baby. This situation, also, does nothing to teach or support the child in taking responsibility for their actions. Our society is breeding a whole generation of people who do not take responsibility for their actions, but take the easy way out.

Minors do not have the maturity to make such decisions on their own. Minors need the wisdom and support of their parents in order to make decisions for life and for taking responsibility for their actions.

We are grateful that this bill is designed to strongly recognize the rights of the family and the parents to support their children through such a crisis and to guide them in making wise decisions for both themselves and their unborn babies.

Very Sincerely and respectfully,



Sharylee Zachary
Box 1531
Petersburg, AK 99833
907-...2-3681

Question: Does this bill also allow a minor to go to the court to get consent to have the baby - when a parent, guardian, etc., wants to force her to have an abortion?



Alaska State Legislature

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

committee on HB 37, dated 2-13-97
bill/subject

As a parent and fellow Alaskan, I ask your support of HB 37. This is a very important bill for families - for family freedom, for family cohesiveness, for parental responsibility. The privacy propaganda and unconstitutionality is bunk, pure and simple. Indeed, it is liberal judges with this same mind set that have, in fact, invaded family privacy to allow a child's abortion surgery without a parent's knowledge or consent. Parental consent & knowledge was constitutional for the first 200 years in this nation and still is. If the state intervenes in the parent/child relationship and takes the parents' responsibility away from them in a life and death situation, as well as a major surgery decision, such as abortion on their child, the state is close to taking all responsibility from parents for raising their children. Please support HB 37 for the sake of Alaskan Families.

Signed: _____

Testifier

Representing (Optional)

PO Box 595 STERLING, AK 99672

Address

262-9319

Phone No.



STATE of ALASKA

Delta Junction Legislative Information Office

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Room 210, Jarvis Office Center
Delta Junction, AK 99737
(907) 895-4236

Fax (907) 895-5017

February 11, 1997

TO: House State Affairs

Please accept the enclosed originals of written testimony for the House State Affairs hearing that was scheduled on 2/11/97.

Copies of this testimony were transmitted by fax on 2/11/97.

Thank you,

A handwritten signature in cursive script that reads "Tammy Renee Hall".

Tammy Renee' Hall
Information Assistant

Enclosures: 1



NATIONAL ASSOCIATION OF SOCIAL WORKERS
ALASKA CHAPTER

525 Main Street, Juneau AK 99801
586-4438 1-800-478-6279 Fax: 586-4439
naswak@alaska.net

Testimony Regarding

HB 37 - PARENTAL CONSENT FOR ABORTION

Before the
JUDICIARY COMMITTEE
ALASKA HOUSE OF REPRESENTATIVES
March 5, 1997

Presented by
Angela M. Salerno, ACSW
Executive Director,
National Association of Social Workers Alaska Chapter



NATIONAL ASSOCIATION OF SOCIAL WORKERS ALASKA CHAPTER

525 Main Street, Juneau AK, 99801
586-4438 1-800-478-6279 Fax: 586-4439
naswak@alaska.net

The National Association of Social Workers (NASW) is the world's largest organization of professional social workers. NASW's 155,000 members nationwide and 460 in Alaska work in a wide range of settings at all levels in the public and private sectors. Professional social workers focus on vulnerable populations and promote state and federal policies which enhance the lives of the people we serve.

Thank you for the opportunity to address the Committee on HB 37 - Parental Consent for Abortion.

NASW opposes HB 37 and does not recommend its passage.

A pregnant woman's constitutional right to choose between childbirth and abortion was established in 1973 by the Supreme Court's landmark ruling in *Roe V. Wade*. All women, including those under 18, are entitled to a safe, legal abortion.

Of the more than one million teenage pregnancies that occur in the United States each year, over 80 percent are unintended. Nearly all pregnant teens are unwed, and some 40% of them choose abortion. The bill before you will require that young women seeking to terminate an unwanted pregnancy receive the permission of parents, guardians or the court before receiving a safe, legal abortion.

This proposal will not act to promote desirable parental consultation. Ideally, a teenager should be able to tell her parents about her pregnancy, obtain their love and support and arrive at critical decisions about her future through family discussions. In fact, the majority of pregnant teenagers do tell at least one parent about their pregnancies. Based on a national survey of more than 1,600 unmarried minors having abortions in states without parental consent laws, 61% discussed the decision to have an abortion with at least one of their parents. The younger the minor, the more likely she was to have voluntarily discussed the abortion with her parents.

Parental involvement laws do not strengthen family relationships. The need to reinforce family relationships is the reason most often cited to justify state laws requiring parental consent before abortion. But such laws are unnecessary for stable and supportive families, and they are ineffective and cruel for unstable, troubled families. Some teenagers cannot tell their parents. Some are victims of incest or other forms of family violence - one study showed that 14% of minors having abortions believed that, if forced to tell their parents about their pregnancies, they would face physical abuse, and 11% feared violence between their parents. Mandatory parental consent cannot transform abusive families into supportive ones.

Mandating parental involvement poses health risks to teenagers. Young women already are more likely than older women to have later abortions, and parental involvement laws only cause further delays either because of fears of telling their parents or because of the inevitable delays in going to court for a judicial bypass hearing. While abortion at all stages of pregnancy is safer than childbirth, the risk of major complications increases 15 - 30% per week. Statistics compiled by the Federal Centers for Disease Control indicate that the risk of death from childbirth is, on average, 24 times higher than the risk of death from abortion up to 12 weeks of pregnancy. Following enactment of Minnesota's parental notification laws, second-trimester abortions among minors increased by 18%. Minors who cannot obtain an abortion in their small towns or villages must travel to other sites to have the procedure, are forced to carry their pregnancies to term, or resort to illegal abortion. Under Minnesota notification statute, the birth rate in Minneapolis for 15 - 17 year olds rose 38%. The American Medical Association has long recognized that parental notification and consent requirements deter minors from seeking necessary health care. The desire to maintain secrecy has been one of the leading reasons for illegal abortion deaths since the Supreme Court recognized the constitutional right to abortion in 1973. Further, the AMA believes some minors may be physically or emotionally harmed if required to involve a parent in the abortion decision.

Teenagers faced with the choice between childbirth and abortion can make a responsible decision without parents or courts. The American Psychological Association has found that minors are usually able to make intelligent, informed decisions about pregnancy. Even young women from severely troubled families often show great maturity and sensitivity when seeking confidential birth services.

A judicial bypass option is inadequate and discriminatory in Alaska. Young women using this procedure often experience fear, anxiety and shame as they are forced to reveal detail of their private lives to strangers in the courtroom. Mandatory representation by the currently overburdened Office of Public Advocacy will surely result in delays or inadequate representation. In rural Alaska, confidentiality will be severely compromised as a young woman will most likely be recognized by the judge or other court personnel.

In Alaska, the courts are moving toward assigning teenagers greater responsibility for their actions, not imposing further restrictions. During the last legislative session lawmakers were successful in passing laws to treat certain juvenile offenders as adults. In the 20th Legislature, bills have been introduced to remove the protections of immaturity from teenagers who commit minor offenses. It is unfair to treat pregnant teens differently with proposals to strip personal responsibility in decisions about reproductive matters.

Parental consent laws are an unconstitutional attack on a women's right to abortion, and in Alaska, on an individual's right to privacy. *Roe v. Wade* entitled all women to legal, safe abortion. Parental consent as well as other provisions of SB 24 such as the creation of civil liability for performing abortion, are barriers manufactured to interfere with this constitutional guarantee. Should this bill become law in Alaska, there will most certainly be court challenges, as the Constitution of the State of Alaska specifically guarantees each citizen the right to privacy.

While NASW supports strong families and believes that parents have profound interests in their children's well-being, in the case of pregnancy, a teenager's privacy rights must be paramount. Courts have found that teenagers who want to keep their pregnancies a secret almost always have sound reasons. When there is a reason to expect an extremely abusive parental reaction to a young woman's unplanned pregnancy, her right to privacy must come first since she is in the best position to know whether or not she is in danger. A legislature that is unfamiliar with a young woman's particular situation is not in a position to force her to involve her parents. Where abortion is concerned, privacy can be a life or death matter for teenagers.

In acknowledging and affirming the social work profession's commitment to respecting diverse value systems in a pluralistic society, we recognize that the issue of abortion is controversial because it reflects the different value systems of different groups. Consequently, NASW does not take a position concerning the morality or immorality of abortion.

NASW's position concerning abortion services is based on the principle of self-determination. Every individual must be free to participate or not participate in abortion services. In the event that a woman choose abortion the following services should be available to her:

- *counseling and referral provided by professionally trained staff who are knowledgeable of the social and psychological dynamics of unwanted pregnancy and abortion*
- *safe surgical care, including pre- and post-operative services*
- *counseling regarding the use of contraception and the prevention of unwanted pregnancies*
- *provision of appropriate contraceptive devices. These devices should be available to all women.*

ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the House Judiciary Committee on HB 65, an act relating to a ban on "Partial Birth Abortions", dated March 5, 1997.

I support HB 65 which would ban partial birth abortions. That any legislation would even be considered which would destroy life at a stage which is acknowledged by the medical profession to be "viable" is beyond comprehension. The term for that is murder, specifically infanticide, and to label it anything else is dishonest.

The entire subject of human life at any stage being controlled by government or laws enacted by humans is in direct opposition to the most fundamental concept of the sacredness of life. Legislatures, composed of human beings do not breathe life and spirit into new beings. That breath of life is reserved to a greater power, as is the end of human life.

Who, in our limited wisdom, will be the final judge of who will be allowed to be born and who will be destroyed? Do you, the House Judiciary Committee, wish to determine that and to take full responsibility for the decision? Next year or next decade will you also determine which of the elderly, terminally ill, infirm, poor or mentally defective will be destroyed?

I strongly believe your authority includes levying taxes, enacting laws to preserve law and order and addressing the well-being and "life, liberty and pursuit of happiness" of the citizens. It does not, I also believe, in any way extend to determining who lives and who dies. To presume that it does displays an arrogance exceeding your job description.

I respect your positions as elected officials and would not wish to make the hard decisions you have to make during each term. I appreciate that the majority of legislators do the job at considerable personal sacrifice and with little personal gain. I urge you to not attempt to involve yourselves in matters which are beyond your jurisdiction.

Signed:

Robert Farrell
Testifier

Representing (Optional)

3501 Halibut Pt. Hwy. Sitka, AK 99835
Address

(907) 747-6718
Phone Number



Alaska State Legislature

Please enter into the record my testimony to the HOUSE STATE AFFAIRS
committee on HB 307, dated 11 FEB 1997
bill/ subject committee name

I am testifying + sending this POM as a parent. My husband + I have 2 adult sons, both married, + 1 granddaughter.

As a parent, I am concerned about parental rights + responsibilities. Parents are given the responsibility, including the teenage but still minor/yea to guide their children in safety toward adulthood, including guiding their children to make good choices along the way. I believe parents also have a right to know of crucial choices happening along the way. If parental consent is needed for school field trips, + taking of any medication at school, surely consent should be needed for a surgical procedure, such as abortion. The risk in a abortion to the baby is obvious + immediate - the risk to that girl is present also, both physically + emotionally. For a parent to not be included in that decision makes absolutely no sense to any

Signed:

BARBARA RAUHALT

Testifier

REPUBLICAN PARTY OF AK - DIST 35 FINANCE CHAIR

Representing (Optional)

PO BOX 3 DELTA JCT, AK 99737

Address

(907) 895-1946

Phone No.

thinking person
I urge a
YES vote
on this bill



Alaska State Legislature

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

committee on HB 37, dated Feb. 11, 1997
bill/subject

11 February, 1997

To: House State Affairs Committee

From: Sitkans for Choice

Re: Proposed HB 37

We oppose HB 37 and SB 24.

We oppose any requirement for parental consent or notification for women or girls of any age to have a safe, legal abortion. Judicial bypass does not make it acceptable. The only abortions eliminated by bills of this sort are those that are safe and close to home.

This bill is not designed to protect the safety of pregnant teens. It is designed to use the power of the state to assert authority of parents to punitively force children to have children.

Because of a similar bill, Minnesota teens were forced to go out of their state to have safe abortions, thus of course reducing the number in Minnesota. Alaska teens will not have such easy access to out of state abortions. Illegal and self-induced abortions will be more readily available.

Only legislators who would rather have their own daughters die from an unsafe illegal or self-induced abortion than have a safe, legal abortion without their consent, should vote for this bill.

Natasha I. Calvin
for Sitkans for Choice
Box 2966
Sitka, Alaska 99835

Testifier

Representing (Optional)

Address

Phone No.

ROBIN SMITH

February 13th, 1997

Dear Honorable Representatives:

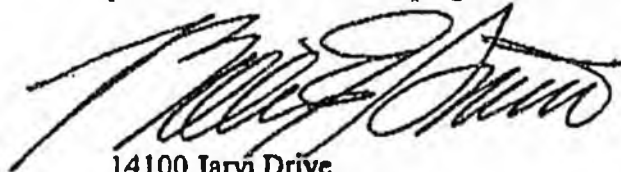
Dealing with an unwanted pregnancy is extremely difficult. Unfortunately in the United States today, if a woman becomes pregnant there is only one acceptable choice, have the child and become a good mother. An abortion is considered heinous and society does not really accept giving up a child as a wonderful, loving act. (We prosecute parents who want anonymity and abandon a child at someone's door.)

What position do we put women in who have an unwanted pregnancy. If a woman feels cornered and threatened her actions can become extreme. Examples are numerous: The young couple who recently may have killed their new born and Jerry Sander's unwanted grandchild who died of starvation. Abortion was not chosen and the results were deadly. The parents of both couples wanted to help their (older) children through their desperation. It did not happen. Even in good families the communication process was not there.

You cannot order "family interaction". I understand the legislature's good intention. I pray for better family communication. I prefer birth control or abstinence to abortion. But when abortion is not readily accessible, dangerous back alley procedures befall and worse.

The way to reduce abortion is to reduce unwanted pregnancy. I *implore* you to spend your effort in this direction. All research shows the vast majority of Americans support more money spent on family planning. Community involvement in a parent/child relation program is another possibility.

We are wasting time, energy, money and losing goodwill in this ongoing debate over abortion. Please use your religious convictions for the common good and address the prevention of unwanted pregnancies not the consequences.



14100 Jarvi Drive
Anchorage, AK 99515
345-4407

Post-It™ brand fax transmittal memo 7671		# of pages	1
To	Rep James	From	Anch 40
cc	Cherly CHISTA	Co.	
Dept.		Phone #	258-8111
Fax #	465 2381	Fax #	

written by _____

ALASKA WOMEN'S LOBBY
P.O. Box 210685 Anchorage 99521
211 Fourth Street Juneau #108 99801
586-1107
fax: 586-1097

POSITION PAPER

HB 37: Parental Consent Before Minor's Abortion

The Alaska Women's Lobby is a statewide advocacy organization representing thousands of Alaskans working toward expanded opportunities, equal access, and enhanced representation for women. The Lobby is supported solely by contributions.

The Alaska Women's Lobby opposes House Bill 37. We wholeheartedly encourage open and honest communication between parents and their children, and support efforts to prevent teenage pregnancy. We don't believe, however, that HB 37 will accomplish either of those goals.

Responsible parents should be involved when their young daughters face crisis pregnancies. It is the hope of every parent - liberal and conservative- that a child confronting this crisis will seek the advice and counsel of those who care for her most and know her best. In fact, most young women do turn to their parents when they are considering an abortion. We are told that in states that enforce no mandatory consent or notice requirements, more than 75% of minors under 16 involve one or both parents.

Young Women Who Do Not Involve a Parent Often Have Good Cause

Unfortunately, some women cannot or will not because they come from homes where physical violence or emotional abuse are prevalent or because their pregnancy is the result of incest or rape. There were approximately 2.9 million cases of child abuse reported in 1992 in the United States. Among minors who did not tell a parent of their abortion, 30% experienced violence in their family or feared violence or being forced to leave home. And, young women considering abortion are particularly vulnerable because family violence is often at its worst during a family member's pregnancy.

Mandatory Parental Consent and Notice Laws Endanger Health

The government cannot force healthy family communication where it does not already exist. Ironically, laws mandating parental notice or consent can actually harm the young women they are trying to protect by increasing illegal and self-

induced abortion, family violence, suicide, later abortions and unwanted childbirth. For example, in Idaho, a 13 year old sixth grade student named Spring Adams was shot to death by her father after he learned that she was to terminate a pregnancy caused by his acts of incest. In Indiana, Rebecca Bell, a young woman who had a very close relationship with her parents died from an illegal abortion because she did not want her parents to know about her pregnancy but Indiana law required parental notice before she could have an legal abortion.

These views are shared by many experts. The American Medical Association takes the position that: "Physicians should not feel or be compelled to require minors to obtain consent of their parents before deciding whether to undergo an abortion...(M)inors should ultimately be allowed to decide whether parental involvement is appropriate. Because the need for privacy may be compelling, minors may be driven to disparate measures to maintain the confidentiality of their pregnancies. They may run away from home, obtain back alley abortions or resort to self-induced abortion. The desire to maintain secrecy has been one of the leading reasons for illegal abortion deaths since 1973."

They also concluded in a 1992 study that parental notice and consent laws "increase the gestational age at which the induced pregnancy termination occurs, thereby also increasing the risk associated with the procedure. Although a first or second trimester abortion is far safer than childbirth, the risk of death or major complications significantly increases for each week that elapses after eight weeks."

The American Academy of Pediatrics similarly contends that: "Legislation mandating parental involvement does not achieve the intended benefit of promoting family communication, but it does increase the risk of harm to the adolescent by delaying access to appropriate medical care...(M)inors should not be compelled or required to involve their parents in their decisions to obtain abortions, although they should be encouraged to discuss their pregnancies with their parents and other responsible adults."

Instead of consent mandates, we believe that it makes more sense to require health practitioners to encourage young women to talk to their parents before making any final decisions.

It is interesting to note that all states have laws permitting minors to receive medical treatment for sexually transmitted diseases without parental consent, recognizing that maintaining confidentiality is essential to a minor's willingness to obtain necessary health care related to sexual activity.

Judicial Bypass Provisions Fail to Protect Young Women

Will HB 37 solve these well recognized problems by allowing teens to ask a judge for permission to terminate their pregnancy as an alternative to parental consent? We don't think so. For most adults, going to court for a judicial order for

any purpose is difficult. For young women, it can be an overwhelming and at times impossible, especially under these circumstances. Assuming they have reasonable access to a court; in the first place, some young women will not go or delay going because they fear that the proceedings are not confidential or that they will be recognized by people at the courthouse. Many will experience general fear and distress and will not want to reveal intimate details of their personal lives to strangers. Others will not be able to attend hearings because they are in school.

Still others, victims of rape or incest, will fear the consequences of possibly having to identify the perpetrators who must under state law then be reported to the proper authorities. And if they do eventually find the courage to go to court, even under the tight deadlines proposed in this bill the time it takes to go to schedule the court proceeding and obtain a decision (not to mention appeals) may result in delays that significantly increase the health risks of the abortion.

In its 1992 decision in Planned Parenthood of Southeastern Pennsylvania v. Casey, the U.S. Supreme Court made it clear that states may not veto a woman's decision to terminate her pregnancy, but that states could impose restrictions so long as those restrictions don't have the "purpose or effect of placing a substantial obstacle in the path of a woman seeking an abortion." By requiring young Alaskan women to obtain judicial approval in order to terminate a pregnancy, HB 37 creates just the kind of "substantial obstacle" the U.S. Supreme Court decision prohibits.

Making Abortion Less Necessary Among Teenagers Requires a Comprehensive Effort to Reduce Teen Pregnancy

The bottom line is that abortions among teenage should be made less necessary, not more difficult and dangerous. A comprehensive approach to promoting adolescent reproductive health and reducing teen pregnancy will require an array of components, including age appropriate health and safety education; access to confidential health services; life options programs that offer teens practical life skills and the motivation to delay sexual activity; and programs for pregnant and parenting teens that teach parenting skills and help ensure that teens finish school. While it has been argued by critics of this view that such programs are ineffective, the fact is that such an approach has never been implemented on a significant scale in Alaska, or the United States for that matter. For more information on this subject, we encourage you to review a 1989 report by the Senate Advisory Council for Senator Pearce entitled "Three a Day: Children Having Children in Alaska".

Conclusion

HB 37 places an untenable judicial burden on young women who, by virtue of their situation, are already facing difficult decisions. By requiring a teenager to seek judicial redress, this bill incorrectly assumes that young women in these situations not only have the resources to seek but also the access to obtain such redress.

We understand and sympathize with the intentions and motivations of HB 37's sponsors and supporters. In a perfect world, all children should talk to their parents before any decisions are made about a teenage pregnancy; and, in fact, most do. But this is not a perfect world. For a wide variety of reasons, many young women will not or cannot talk to their parents or a judge about this unique, very personal and very difficult decision.

Unfortunately, instead of transforming dysfunctional families into stable ones it will force many teens to have their father's or rapist's child, to risk their lives by having illegal or self-induced abortions, or suffer with the results of exacerbating an already troubled or dangerous home life. That is a pretty dear price to pay for a message that will not be heard by its intended audience.

For these reasons, the thousands of Alaskans represented by the Alaska Women's Lobby oppose HB 37.

FAX Transmission

From: Stephanie Hethcote Valley Crisis Pregnancy Center
Questions? Call 907 373-3456 2650 Broadview Ave Ste 102
 Fax 907 376-7847 Wasilla, AK 99654

To: Rep. Jeannette James
Company: House State Affairs Committee

Address: 907-465-2381
Date: 2/14/97
Time: Pages: (including this one) 3

Message: *Re: HB 37*

Thank you so much for the opportunity to share my opinion concerning parental consent for a minor to have an abortion.

February 14, 1997

Dear Ms. James:

I would like to speak in favor of this bill. As the director of a Crisis Pregnancy Center, I am well acquainted with the ramifications of teenage sexual activity. Every day I encounter young women who are under terrible pressure from society, their peers, their own insecurities and, sometimes, even their parents to terminate an unexpected pregnancy. They desperately need to talk, to vent their pain and they need someone to listen and to help sort through all the options. We do the job their parents should be doing--the listening and the loving.

I understand that a few parents do not care. I also know that the majority of parents love and take great interest in their children's lives. They want to be involved, to teach them to make wise decisions. This bill would help parents stay involved at one of the most cataclysmic times in a young girl's life--that of facing an unexpected pregnancy.

As it stands now, all the parents have the right to do is pay the doctor bills, or perhaps the funeral expenses, should the abortion go awry. The parents are left to deal with the psychological injuries the procedure so often inflicts. They have no right to know what is causing their daughter's problems of deep depression, guilt, anger, food, drug or alcohol abuse, low self esteem, or perhaps even attempted suicide.

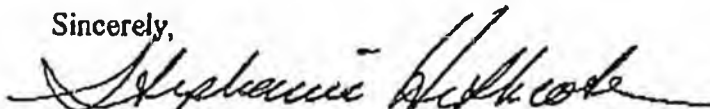
All of these crippling symptoms of Post Abortion Stress Syndrome could have been avoided and very likely the cause circumvented had the young girl's parents been informed. The financial and psychological cost could have been averted if they had only talked to each other. This bill would assist them in doing just that.

I have listened as girls have recounted the stories of their abortions. Usually they were given very little or no information about the procedure or the alternatives beforehand and were never consoled afterwards. Almost all that I have listened to say emphatically they would never go through an abortion again. What was a quick and uncounseled decision has brought them a life time of anguish. Many suffer alone in fear that parents, who have been supportive and loving in every other area of their lives, would somehow no longer love them if they knew. I do not believe that is true. Yes, there would be pain and disappointment, but I believe those same loving parents would have listened; would have rallied around their daughter and helped support her--if only they had known.

The judicial bypass clause in this bill will adequately protect the very small number of pregnant girls who have suffered from rape and incest. The vast majority will have the love and support of their families to help them make the most difficult decision of their young lives. I urge you to protect a parent's right to be involved in this decision.

Thank you for the opportunity to speak out on this bill.

Sincerely,



Stephanie Hethcote



Alaska State Legislature

Please enter into the record my testimony to the HSTA
committee name
committee on HB 37, dated 2-11-97
bill/subject

I am a fifteen year old boy, and I am in favor of HB# 37. I think it will give the parents more of their God given rights back that the parents have so gradually given away. This will promote a more stable and united family. It will make teens more responsible with their sex life knowing that they will have to be accountable to their parents about abortion if that is what the teen wants. This will allow the parents to tell their teens of some abortion risks that teens need to know. Please do not take away the rights of parents, because in doing so you will be taking away my future rights as a parent. Please vote in favor of HB# 37.

Signed: Connor Barry
Testifier

Representing (Optional)

PO Box 3514 Seldotna, AK 99669
Address

(907)-262-9790
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the HSTA
 committee name
 committee on HB 37 dated 2-11-97
 bill/subject

I am a seventeen year old girl in favor of CSHB #37 for many reasons. I believe that parental rights, responsibility, safety, and not abortion are the issues.

I do not see the difference between a surgery and abortion. Parental consent is mandatory for a minor to have surgery. What makes abortion so different? It is in media's surgery. Many argue that it is of a different nature and that girls need privacy. If so, then, I believe we have a whole lot of private things to get out of media. Some argue that family communication cannot be legislated. I say what about the laws that require minors to notify their parents about speeding tickets. Is this trying to enforce family communication? Just because the communication might not work the way the state thinks would be prime, the state still knows that it is the responsible thing to do. If it is

Signed: Chelsea Booy
 Testifier

Representing (Optional)

PO Box 3514

Address

Soldotna, AK 99669

Phone No.

907-267-9700

CHELSEA BARRY 2 of 3

such a different private matter than why do we have illicit sex shown across the country to young and old alike on television? It doesn't take a rocket scientist to figure out the natural progression of things after sex. The girl would get pregnant and do one of three things: have the baby and rear it; have the baby and put it up for adoption (with two million couples waiting to adopt a child in the U.S. I would say that our country is not against adoption), or have an abortion. Abortion is not a new or unknown idea. It still can be private within the family.

Just yesterday a trained counselor from a crisis pregnancy center asked me a few basic questions about my medical history. "Are you allergic to penicillin? When was your last Tetanus shot? Do you have Rh?" I had absolutely no idea and immediately turned to my stepmom, who was present for the answers. I am seventeen. Some of these thirteen and fourteen year old girls going in to get abortions without their parents will most likely not know this information that is imperative for the safety of the girl. My great aunt almost died due to an allergic reaction to a dose of penicillin.

We need to take a serious look at the health consequences down the road. The initial response of a girl after the abortion is relief but nobody talks about after that. What about girls who have had abortions having miscarriages because of the torn, damaged muscles of the

CHELSEA BARRY 3 of 3

sex^ual caused by the abortions? What about all the infertility caused by scarring inside the uterus after abortions? What about breast cancer? Researchers at Penn State University discovered in an analysis of twentythree studies from around the world of cases dating back to 1957 that women are much more prone to breast cancer in later years after abortions. What about the psychological aspect? There are sixteen support groups on the internet alone for post abortion stress. To me that implies that it does affect a girl after the abortion and not just in a physical way.

Being at the end of the age group that this bill refers to I plead with you to help protect the girls who I am representing. Girls need to have independance, however, we have enough trouble already making small decisions, and who need that loving, holding hand to depend on. Don't leave your daughters alone on this, parental involvement is crucial. Please vote for CSHB #37.



Alaska State Legislature

Please enter into the record my testimony to the HSTA
 committee name
 committee on HB37 , dated 2-11-97
 bill/subject

I concur entirely with Rep. Kelly testimony supporting this bill. I am Elizabeth Berry, 39 y.o. wife + stepmother of 3 teenagers, 2 still living at home. I hold a license as a paraprofessional in the mental health field.

I support CS HB37. This is an issue of parental rights and responsibilities not an issue of abortion rights or privacy rights.

This undoubtedly would not be such a hotly debated topic if the Bill was called HB37 "Parental Consent Before Minor's Surgery".

According to AK Statutes, parents are legally responsible for their minor children until they reach the age of majority which in Alaska is 18 years old. Parents also have the legal authority and legal responsibility for their minor children's actions. (There are cases that the responsibility extends beyond 18 y.o.) Parents are held accountable for the misdeeds of their minor children as well and this merely how minors are subject to the authority of his or her parents. As of 1-31-97 we had thirty-one Bills in the State House + Senate pertaining specifically to minors because minors legally come under different authority than adults.

On the issue of minors with abusive parents fearing further parental abuse and the intimidation of facing the judicial bypass procedure on her own being to intimidating: AK Statute 47.10.010 "Delinquent Minors and Children in Need of Aid" is already in place and active. I believe most minors in Jr. High + High School realize that any abuse by parents or guardians reported by a student to a school official must be reported to D.F.Y.S. + then must be followed upon. If an abusive situation is discovered and the minor is removed from her home + placed in foster care,

Signed: Elizabeth Berry
 Testifier

Representing (Optional)

P.O. Box 3514 Soldotna AK 99669

Address

262-9790

Phone No

she receives a caring, supportive home and all of the legal representation and assistance she could need.

On the issue of emotional and psychological consequences: Even if an abortion has been performed safely the emotional and psychological consequences can be devastating, teens have simply not been on the planet long enough to understand about this aspect of life, long range consequences. Even though it has been stated at these ~~the~~ conferences that 98% of women claim they would repeat their abortion, I question if they were asked this during an initial period of relief following a crisis once it ^{was} seemingly resolved, or if asked many years later. A ministry called "Open Arms" created specifically to aid women suffering emotional consequences of abortion states 94% of women they came into contact with ~~with~~ ^{with} ~~they~~ were properly informed of the fetal development prior to having their abortions, they would not have carried through with it. In one hour on the telephone on Friday 2-14-97 I contacted ~~four~~ organizations that offer aid or referrals to aid to women seeking help with post abortion stress. One was a Crisis Pregnancy Center that offers counseling at all of its 3,000 centers nationwide. There are 16 groups on the internet that offer assistance for this. And yes, I am aware that the A.P.A. and A.M.A. do not officially recognize any such problem. Especially since Dr. C.E. Koop was so grossly misquoted in the 1980's. Please note what Dr. Koop said in an interview in the "Rutherford Institute Magazine, Spr. 1989:

"Instead of saying 'the Surgeon General could not find sufficient evidence to issue a scientifically statistically accurate report that could not be assailed,' the Associated Press said;

'He could find no evidence.' I know there are detrimental effects [from abortion], I have counseled women with this problem over the last fifteen years. There is no doubt about it." . . . When I got home, my wife was in a frenzy. "You won't believe what they are saying on television," she said. "Rather said it, Brokaw said it, Jennings said it, that you had not been able to find any evidence that there are psychological effects of abortion."

"So that's where it all began. And I spent that entire night on the telephone, until about one o'clock in the morning, doing as much damage control as I could."

I urge you to please vote in favor of parental rights so parents can take their responsibility and continue to do all in their power to protect their children.

A list of Organizations I contacted or was referred to:

Project Rachael - through Catholic Charities 1800-CARE-002
 CARE NET - 703-478-5661 - 1800-395-HELP
 ABC Crisis Pregnancy Center - Kenai, AK.
 Open Arms - 314-449-7672
 Post Abortion Ministries - Tenn. 901-837-5343
 Last Harvest - 810-422-4542
 Institute for Pregnancy Law - 603-431-1904
 American Rights Coalition - 904-474-6091
 Legal Action for Women - 1145 Conduwood Circle
 Birth Right 800550-4900 Pensacola, FLA 32514
 National Office for Post Abortion Support Services 1800-593-2273
 Nurturing Network - 800-TNN-4MOM
 Americans United for Life 800-626-6149
 Alaska Woman's Resource Center - 276-0528



Alaska State Legislature

Please enter into the record my testimony to the HSTA
committee name
committee on HB 37, dated 2-11-97
bill/subject

Please support HB 37. I was once the victim of an unwanted abortion, coerced by the baby's father to accomodate his fears of fatherhood. He was my husband of two months. The public health nurse in Kenai, Alaska also encouraged the abortion after delivering the positive results of the pregnancy test. I was never informed about alternatives or the physical and emotional risks, neither was the surgery explained at all. Of course, my immediate family, my parents included, never knew. Even though I was newly married, given the support of loving parents to help me make my decision, as well as their wisdom about getting accurate medical information, instead of the pressure to hurry and abort from the only two individuals who know, I probably would not have chosen the abortion. It has taken many years to recover from this devastating experience. The loss of a child, the regret, the guilt are now a permanent part of my life.

A teen should never approach a decision about abortion abruptly and without adult supervision, especially from those who care most about her, i.e., her parents. Many teens have died in this country. Many more are suffering from infertility, breast cancer, self-abuse and thoughts of suicide. Parental consent is not aimed at obstructing privacy or rights, as if abortions were beneficial in some way, but is necessary to protect minors' vulnerability to coercion, unscrupulous doctors and the trauma of a medical procedure that takes a life and threatens the well-being of the patient.

Signed: Rebecca L Perry

Testifier

Kenai-Soldotna Right to Life

Representing (Optional)

PO Box 3623, Soldotna, 99669

Address

260-3887

Phone No.

3/5/97

HB 37
Worna @ Kelly's office
ph # 2327

Witness / offnet
Judith Kohler
(312) 786-9494

→ 1 (800) 478 7612

Anch
Fbks
Kenai
Sitka



Alaska State Legislature

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

committee on HB 65 & HB 37, dated 3/5/97
bill/subject

HB 65: Partial birth abortion is child abuse in its most extreme form. I believe the destruction of human life (albeit in the womb) chips away at society as a whole.

HB 37: Laws prevent minors from buying cigarettes and alcohol. It does not make sense a major decision of a young girl to have an abortion can be made without parental knowledge or consent.

Signed: A. Vivian Mack
Testifier

Representing (Optional)

P.O. Box 2095
Address

907-747-7816
Phone No.



Alaska State Legislature

Please enter into the record my testimony to the House Judiciary committee name
CSHB 37
 committee on Parental Consent, dated 3/5/97
 bill/subject

I oppose CSHB 37. As a lawyer who has formerly represented Bush juveniles, I see this bill as ^{the equivalent of} a bar to access to abortions in certain groups of teens. ^{Focusing} the ~~focus~~ teens to either disclose ~~to~~ to parents in order to obtain consent or to seek a court order adds a layer of ~~invasive~~ intimidation to a process that is already overwhelming. It is exactly those situations - such as incest or rape - where a teen feels they cannot involve their family that will be most

Signed: _____
 Testifier *Lisa Fitzpatrick* Lisa Fitzpatrick

 Representing (Optional) _____

 Address 2522 Iliamna Ave. Anch. Anchorage

 Phone No. 248-1206

negatively impacted. Suggesting that a teen in a small bush village

to seek a court order to bypass parental consent presents no ~~unreasonable~~ to unreasonable burden I should have &

Kathryn L. Carssow
1335 'O' Street
Anchorage, Ak. 99501
(907) 274-7909

March 5, 1997

Representative Joe Green, Chair, and
Members of the House Judiciary Committee
Alaska State Legislature
Juneau, Alaska 99801-1182

Dear Representatives Green, Bunde, Berkowitz, Croft, James, Porter and Rokeberg:

When I was a senior in high school I worked hard got great grades and was headed to my state's university. I was a founding member of the local "Up With People" movement, on the school's drill team and newspaper, active in drama and many other activities. I taught bible school at the Presbyterian church in which I had been raised. My parents were active Republicans. My father owned a successful aluminum foundary, was a church elder and regional governor of Lyon's club. My mother belonged to a long list of community organizations and had received several volunteer awards. My mother was a warm-hearted, person and we were very close -- I could talk to her and count on her support. We were anything but a dysfunctional family.

But, midway through my senior year of high school I got myself pregnant. I knew I could confide in my mother, but I felt that it was my mistake and my problem. I was a very proud teenager and ashamed that I had made such a terrible error in judgment. I also knew that as soon as I confided in any adult the choice of whether or not to carryout the pregnancy would be out of my hands.

This is what HB 37 does. It takes the decision out of the hands of the girl who is pregnant. At that time Planned Parenthood wasn't in my community. I couldn't talk to my doctor knowing he would tell my parents. I had no adult to turn to without giving up my own power to decide my own future. The adult I did turn to is the adult we should all live in dread of our teenage daughters turning to -- I turned to an illegal abortionist. I am telling you this story because I want you to understand what is at stake here with HB 37.

I won't ask you listen to the details of my ordeal. But I do want you to know that on a snowy night in January of 1969 I was lying alone on the floor of the hall-way of my family's home passed out and bleeding. Can you imagine my parent's horror if they had found me? Can you imagine your horror if you found your daughter in such a state? What if she was dead?

Obviously, I didn't die. And I thank God, because I know so many others weren't as lucky when abortions were illegal. One way inwhich I am thanking God for not taking my

Representative Joe Green, Chair, and
Members of the House Judiciary Committee
March 5, 1997
Page 2.

life when I was so young is to be here today, telling you this story. I'm doing it because I am so very afraid for the girls of our community. I want you to realize what is likely to happen again if you make safe, legal abortions unavailable to desperate teenage girls who can't get their parent's permission -- or who for their own private and personal reasons -- won't get their parent's permission.

It will be just a matter of time before the "good," caring parents of a "good" daughter find her bleeding to death on the floor of their hallway following a botched abortion. This doesn't need to happen.

We may disapprove of the choices our teenagers make. We wish they would turn to their parents in times of crisis. But we cannot force them to. Not one girl in our state deserves to end up ravaged by infection or bleeding to death because of having made "bad" decisions. Please don't put the daughters of our community at such risk. If you pass HB 37, you are creating a new business niche that will be filled by opportunists who will prey on vulnerable girls in crisis. Let me tell you from first hand experience these are not nice people. We don't want them setting up practice here.

Sincerely,



Kathryn L. Carssow

From: Kevin &

Post-It™ brand fax transmittal memo 7671 # of pages ▶ 5

1 of 2

To	Rep Green Chair	From	Anch LIO
Co.	(H) Judiciary	Co.	
Dept.		Phone #	258-8111
Fax #	465-4316	Fax #	

Greetings;

I speak in opposition to HB 37 regarding parental consent. I am a member of the ordained clergy as well as a person who works with youth in trouble. As a member of the clergy I have been a strong advocate of the sanctity of life as well as justice for all persons. Working with teens in trouble has given me a renewed challenge in finding hope and justice for our youth in trouble. Although Alaska has one of the highest rates of child abuse and domestic violence in the United States I was disturbed by the realization that probably one hundred percent of the young women I work with have been sexually abused by someone - most likely a family member or friend.

This bill will demand that young women who seek abortions will have to ask permission of those at whose hands they may have suffered abuse. It is neither just nor life-giving to ask that of any person. I understand there are ways to get parental consent waived. If each of us were to try to remember what it was like to be young we might have a greater regard for the difficulty of the responsibilities we are placing on our youngest citizens, especially those who live in villages or communities which are often cut off by bad weather.

I am not saying that in an ideal world parental consent would not be appropriate. I am saying we do not live in an ideal world. The world in which our children grow up these days is very different from the world in which we knowingly grew up. I believe the same issues were present in our childhood days but they were not to be made public. We have now come to the place where we can speak out against injustices done to our children and youth. We give our youth voice and we believe them and work to protect them. This law only protects the idyllic world we would like to have. It does not protect the teenagers living in a real world.

If your parent abused you or called you a slut would you feel comfortable even telling them that you were pregnant - that you had made a mistake but that you didn't want your whole life to be destroyed? I think not. Most teens I know in that situation would lie about their age, try to run to a state where they could get an abortion, find a friend who knew someone in the back alley willing to do abortion or find a coat hanger or coke bottle. Does that present a picture of hope and justice for the abused young woman?

I ask you to please think about the law you are recommending. Does it really address the issue of teen abortions by providing funding for education and birth control as a preventative measure or is it just making a statement about abortion at the expense of our young citizens who do not yet have the right to vote?

In the name of justice and hope consider alternative ways of addressing this issue without placing the blame and undue burden on teenage girls. They are our hope and they deserve to be respected and given all the tools they need for life.

Thank you for the chance to share with this committee.

Rev. Carol Ann Seckel

205 Sweetgale Ct.
Anchorage, AK 99518
344-2917 - hm.
344-2101 - AK Children's Serv.



Alaska State Legislature

Please enter into the record my testimony to the HOUSE JUDICIARY Comm.
 committee on HB 37, dated 5 MAR 97
bill/ subject committee name

I urge passage of this bill to require parental consent for a minor to have an abortion. Parents have the responsibility to guide their children, + are required to give their consent on many more mundane matters, that have been cited earlier, ~~is~~ surely ^{they} should be needing to give their consent in this ~~context~~, potentially life-threatening surgical procedure. To exempt this procedure from the requirement for parental consent makes no sense at all, + further erodes parental rights. I strongly urge passage of this bill.

Signed:

BARRARA LAWACT

Testifier

RPA - DIST 35 - FINANCE CHR.

Representing (Optional)

PO BOX 823 - DELTA

Address

895-1946

Phone No.

11 March 5, 1997

Thank you for this opportunity to speak in support of HB 37. I would like to encourage the legislators to include an amendment to it. Sadly alternative situations do result in which a young girl recognizes the sanctity of human life but her parents do not. She needs to have equal recourse if her parents are coercing her to consent to an abortion.

I am opposed to any and all abortions. Call it what you will, justify it as best you can, it is and always will be the killing of innocent human life. Once priceless, human life in this country now has a price. And like all items in a capitalistic society, life is now subject to the law of supply and demand and the selfish desires of men.

If the medical profession of this country had had the backbone and moral stamina it should have had, abortions would never have been legalized. Because of the medical profession's weak and unconscionable silence, the government of this country is being forced to fill the void. I applaud each and everyone of you pro-life legislators. Yours is a difficult and challenging task but a most sacred and worthy one. I thank you a thousand times.

Respectfully submitted,

Elizabeth Pawuk

Mrs. Elizabeth Pawuk
P.O.Box 804
Petersburg, Alaska 99833
907-772-3985

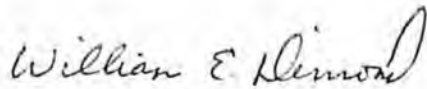
Tiffany E. Pawuk
William H. Pawuk

ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the Judiciary Committee on House Bill No. 37, dated March 4, 1997.

At this time, I would like to extend my support toward the passing of HB No. 37. I feel that we must expedite the passing of this Bill because of the suffering that Abortion brings not only to the young woman, but their parents and relatives as well. I also believe that the Judges should not have control over a young women's life, they don't care about the lasting affect that such a heinous act produces in the heart of any age women.

Thank you for your considering my testimony.



William E. Dimond

P.O. Box 1101

Sitka, Ak. 99835

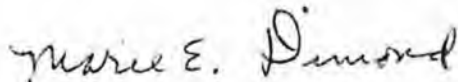
(907)747-5621

ALASKA STATE LEGISLATURE

Please enter into the record my testimony to the Judiciary Committee on House Bill No. 37, dated March 4, 1997.

At this time, I would like to extend my support toward the passing of HB No. 37. I feel that we must expedite the passing of this Bill because of the suffering that Abortion brings not only to the young woman, but their parents and relatives as well. I also believe that the Judges should not have control over a young women's life, they don't care about the lasting affect that such a heinous act produces in the heart of any age women.

Thank you for your considering my testimony.



Marie E. Dimond

P.O. Box 1101

Sitka, Ak. 99835

(907)747-5621



Alaska State Legislature

Please enter into the record my testimony to the Members of The House
 committee name .
 committee on HB 35/ , dated 3/3/97
 /bill/subject

THE FAMILY IS THE CORE UNIT OF THIS GREAT COUNTRY! IT IS THE RESPONSIBILITY OF THE PARENT(S) TO GUIDE THE UNEMANCIPATED MINORS WITHIN THE FAMILY UNIT. IF THE GOVERNMENT TAKES AWAY ANY OF THE RESPONSIBILITIES ASSOCIATED WITH THAT PARENTAL GUIDING POWER, INCLUDING BUT NOT LIMITED TO CHILDREN HAVING SURGERY, THIS CORE UNIT WILL BE DIMINISHED AND THE COUNTRY AS A WHOLE WILL SUFFER.

PLEASE VOTE TO PRESERVE THE FAMILY UNIT. VOTE TO INSURE THAT PARENTAL CONSENT IS NECESSARY FOR MINORS TO HAVE AN ABORTION.

SINCERELY,
Michael Laguire
 MICHAEL LAGUIRE
 BOX 6369
 SITKA, ALASKA



Alaska State Legislature

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

committee on H.B. - 37, dated 3/5/97
bill/subject

I wish to express my opinion in favor of the upcoming Parental Consent bill. If a minor can't have their ears pierced or take an aspirin in high school without their parents consent, something as life changing + traumatic as having a abortion should certainly be included. No judge, school or government official would in the majority of cases have child's best interest at stake, more than parents. At a time when the traditional family is under attack, we as a people should stand to strengthen it and not pass laws that would lessen it's positive influence. I would appreciate your voting in favor of this bill.

Signed: John Poluka
Testifier

Self
Representing (Optional)

311 Wontman Loop - Sitka
Address

907-747-8089
Phone No.

March 5, 1997

Kimberly Miller
3320 Nowell Ave., Apt. 4
Juneau, AK 99801
(907) 586-1569

Representative Joseph Green
State Capitol
Juneau, AK 99801

Dear Representative Green:

I am writing to express my strong opposition to HB 65 concerning late-term abortions. I feel this is an attempt to exploit a rare and tragic occurrence by opponents of choice to further their goal of making all abortions illegal.

I realize that many professionals from the medical field have testified and been able to provide detailed information regarding the use of the dilation and extraction method. I will not repeat this information other than to say that late-term abortions are used when the life of the mother is endangered or when severe abnormalities exist with the fetus, not to abort an unwanted child. The circumstances that make late-term abortions necessary is critical to the opposition of HB 65 due to the fact that it is an essential option for Alaska's women and families who find themselves in this tragic situation.

I urge you to step beyond the emotional and moral atmosphere that this topic produces and continue to let families and their doctors make this crucial and heartbreaking decision to end wanted pregnancies based on their individual circumstances.

Thank You,
Kimberly Miller, MSW

Changes made
in (S)Jud

MEMORANDUM

TO: LAURA CHASE, SENATE JUDICIARY
FROM: MIKE PAULEY, OFFICE OF SEN. LOREN LEMAN
(465-3841 phone / 465-3973 fax)
DATE: 17 FEBRUARY 1997
RE: SENATE BILL 24
(Work Draft 0-LS0210\A)

NUMBER OF PAGES: 3

We would recommend drafting a CS for Senate Bill 24 which incorporates the following changes:

(1) Page 7, following line 21. Insert a new subsection to read:



"(n) Blank copies of the forms prescribed under (l) of this section, as well as information on the proper procedures for filing a complaint or appeal, shall be made available at each superior court and district court location, including magistrate locations. The information prescribed under this subsection shall include notification to the minor that there is no filing fee required for either form, that no court costs will be assessed against the minor, that an attorney will be appointed to represent the minor, and that the minor may request that the superior court with appropriate jurisdiction hold a telephonic hearing on the complaint so that the minor need not be personally present."

(2) Page 7, lines 9-14. The Court system has recommended that if we will be involving magistrates in the judicial bypass procedure, there is a need for more explicit confidentiality language in subsection (k). The following language is what they have suggested. It looks OK to us, but we would welcome any comments or revisions from the bill drafter on this wording:

(k) Each hearing under this section, and all proceedings under (j) of this section, shall be conducted in a manner that will preserve the anonymity of the complainant. All information and court records that pertain to a minor's request for a form prescribed under (l) of this section, a minor's request for information prescribed under (n) of this section, or a minor's filing of a complaint or appeal under this section prepared by or in the possession of a court or a court employee in the discharge of the court's or the court employee's official duties are confidential and may not be disclosed directly or indirectly to anyone.

including the minor's parent, guardian, or custodian. [THE COMPLAINT AND ALL OTHER PAPERS AND RECORDS THAT PERTAIN TO AN ACTION COMMENCED UNDER THIS SECTION, INCLUDING PAPERS AND RECORDS THAT PERTAIN TO AN APPEAL UNDER THIS SECTION, SHALL BE KEPT CONFIDENTIAL AND ARE NOT PUBLIC RECORDS UNDER AS 09.25.110 - 09.25.120]

(3) The bill drafter has noted that the meaning of "parent" in the bill is not self-evident, e.g., does it include a divorced parent who has no custody, does it include stepparents, etc.? It is the intent of the sponsor that the rights of parents should correspond with their responsibilities. In other words, if the parent has legal custody of the child, then the parent ought to have the right to consent. The drafter has provided the sponsor language from federal law relating to when a minor can join the armed services (10 USCS 505). It states as follows: "However, no person under eighteen years of age may be originally enlisted without the written consent of his parent or guardian, if he has a parent or guardian entitled to his custody and control."

If the drafter concurs with this wording, we would propose similar language:

"parent, guardian, or custodian" with respect to a minor, means a parent, guardian, or custodian who is entitled to her custody or control.

We are not certain where this language should be inserted in the bill, and will yield to the drafter's discretion.

(4) Page 2, line 25. A technical change is required here, in order to make the language consistent with the rest of the bill:

* (3) before an abortion is knowingly performed or induced on an unmarried, ...

* (5) There are several instances in the bill where the word "woman" is used to describe the pregnant minor. At least in common usage, the term woman implies an adult female, and to that extent this wording can cause confusion. Given the context of the bill, it is unlikely a court would be confused on the meaning, but the public might. We think it is an important distinction, since the Constitutional rights of minors and adults with respect to abortion are very differently interpreted by the Supreme Court. Accordingly, we recommend substituting the term "minor" or "minor's" in the following areas where the terms "woman" or "woman's" are employed:

Page 3

Line 6 (both references)

Line 9

Line 11

Line 13
Line 17
Line 21
Line 22
Line 23
Line 26
Line 29

Page 4

Line 1 (both references)
Line 3
Line 5
Line 7
Line 8
Line 13
Line 26 (both references)
Line 28
Line 29

Page 5

Line 27 (both references)

(6) We would appreciate if the drafter could advise us on whether any of the above changes, particularly those mentioned in (1) and (2), would require any Court Rule changes. A representative of the Court System has given me a "tentative" opinion that no rule changes would be required, but he believes Legal Services is better equipped to give a definitive answer.



Alaska State Legislature

Please enter into the record my testimony to the STATE AFFAIRS

committee name

committee on HB-37 / ^(MINOR ABORTION) PARENTAL CONSENT, dated 02-17-97

bill/subject

AT AGE 22, I HAD MY FIRST ABORTION. STATISTICS REPORT A HIGH PERCENTAGE RATE FOR REPEAT ABORTION WITHIN SIX MONTHS. IT'S TRUE. SIX MONTHS LATER I HAD A SECOND ABORTION. THESE PROCEDURES MADE A PROFOUND IMPACT ON MY LIFE. NOT ONLY WAS I LEFT EMOTIONALLY NUMB, BUT THIS SET A PATTERN FOR SUBSEQUENT DECISION MAKING IN THE YEARS YET TO COME.

I EXPERIENCED MANY OF THE UNHEALTHY ASPECTS ABORTION BRINGS TO A WOMAN'S LIFE. MY SELF-ESTEEM PLUMMETED. A PROLONGED DEEP DEPRESSION SETTLED OVER ME. SECRETLY, I WAS ASHAMED OF WHAT I HAD DONE TO MY BABIES. AND, I SOON RECOGNIZED A COMPLETE DISLIKE OF MEN. FOR MANY, MANY YEARS I FOUND NO ONE WITH WHOM I COULD DISCUSS THIS INCREDIBLE TURMOIL WITHIN ME. I'D BECOME EMOTIONALLY NUMB AND VOID OF HAPPINESS.

NOW, I AM 45 YEARS OF AGE AND HAVE SUCCESSFULLY MADE MANY GOOD AND HEALTHY LIFESTYLE CHANGES. HOWEVER THERE IS AN ACCIDENTALITY FOR THOSE DECISIONS MADE IN MY YOUTH. I HAVE NO GRAND CHILDREN IN MY LIFE BECAUSE THERE ARE NO CHILDREN. ALWAYS THERE ARE HOLLOW REMINDERS OF THIS DURING CHRISTMAS AND BIRTHDAY MILESTONES... EVEN HIGH SCHOOL GRADUATIONS.

IF I FIRST MADE THIS DECISION TO ABORT MY BABY (BABIES) ALONE AT AGE 22, AND QUIETLY GRIEVED OVER THIS MOST OF MY ADULT LIFE, HOW CAN WE ASSUME A GIRL OF 13, 14, OR 15 CAN COPE WITH THIS? WOULD YOU HOPE FOR THE SAME SAD LEGACY YOUR YOUNG DAUGHTERS TO REAP? REGARDLESS OF THE DECISION TO KEEP THE CHILD OR END THE LIFE, IT IS OF UTMOST IMPORTANCE THAT THERE IS STRONG PARENTAL INVOLVEMENT HERE.

ABORTION IS A VERY LONELY CALL TO MAKE - IT CAN CAUSE A QUIET DESPERATION DEEP WITHIN... PROTECT YOUR DAUGHTERS SUPPORT HB-37

Signed: _____

Testifier

Representing (Optional)

Address

Phone No.



Alaska State Legislature

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

committee on H.B. - 37, dated 3/5/97
bill/subject

I wish to express my opinion in favor of the upcoming Parental Consent bill. If a minor can't have their ears pierced or take an aspirin in high school without their parents consent, something as life changing + traumatic as having a abortion should certainly be included. No judge, school or government official would in the majority of cases have child's best interest at stake, more than parents. At a time when the traditional family is under attack, we as a people should stand to strengthen it and not pass laws that would lessen its positive influence. I would appreciate your voting in favor of this bill.

Signed: [Signature]
Testifier

Self
Representing (Optional)

311 Wortman Loop - Sitka
Address

907-747-8089
Phone No.



Cynthia Brooke, MD
A Balance of Health
and Prevention

Cynthia Brooke, M.D., F.A.C.O.G

Diplomate of the American Board of Obstetrics and Gynecology

To: Joe Green, Chair Fax#465-4316
Ethan Berkowitz Fax#465-2137

Written testimony regarding House Bill #37 Introduced by Rep. Kelly, Kohring, Vezey and Molder. Senate Bill #24, Robin Taylor.

I would like to thank the members of the legislature for allowing me to testify both verbally and in writing. As a brief introduction, my name is Cynthia Brooke and I am a board certified Obstetrician/Gynecologist practicing in Anchorage. I did my medical school training at the University of Washington and was a WAMI student in Alaska for 3 months in the summer of 1985 and have considered myself lucky to be able to come back to Alaska to practice medicine. I did my specialty training at the University of Texas in San Antonio which is a very busy county hospital serving south Texas and central Mexico. I have been practicing Obstetrics and Gynecology in Alaska since 1992 and have been a solo practitioner in Anchorage since 1995. I am currently on the Board of Trustees of the Alaska State Medical Association and have been asked to review any legislative bills that may impact on my specialty.

Obstetrics and Gynecology is a specialty that deals with pregnancy, pregnancy complications and any medical or surgical diseases associated with female reproduction. Because of this, we also deal with infertility, hormonal disorders, pelvic anatomy dysfunction including bladder and rectal problems and pelvic tumors. Our daily interaction with patients include detailed histories which because of the nature of our specialty impacts on very private issues. We would be of little use to patients if they could not confide such private matters such as sexual dysfunction, unwanted pregnancies, inability to become pregnant, abuse issues including physical, psychological and sexual abuse and anatomical dysfunctions. The privacy of this relationship between the doctor and the patient is absolutely essential to provide appropriate treatment, care and support. Those of us who live in Alaska and understand what a small community this really is, can probably understand the importance of this confidentiality better than persons who live in more urban settings.

I have some significant concerns about this bill and most of them center around the confidentiality issues. We all know that teenage pregnancy is far too common. I deal with this issue on a daily basis. Whether or not one considers teenagers too immature to make decisions about their own health, future and reproduction; as human beings they deserve to expect the same level of confidentiality and professionalism from their health care providers as their parents would expect. I treat many families in my practice. I would never consider breaking the confidence of one of my teenage patients with one of her family members without that teenager's permission any more than I would tell the

Page 2 Written testimony

teenager of a personal issue that her mother has discussed with me. We actively encourage teenage patients to confide in their parents and the vast majority of them do. However, they do this on their own terms and I think with more honesty than in any artificial scenario I could manipulate. In this way I can keep my relationship with both the mother and daughter intact as confidant and health care provider, giving them unbiased medical facts versus being a policewoman or unwanted arbiter of family tensions.

I think you as a legislature should also know that some teenage pregnancies are the result of extremely harmful, abusive living situations in which it is not in the patient's best interest to inform one or both of her parents. Specifically in the case of incest or abuse by a mother's boyfriend or rape by a close family friend, it is sometimes unrealistic or even unwanted to inform certain family members without the patient's permission. There are some situations where this could even put the patient in harm's way. I think it is absolutely inconceivable to think that a teenager who cannot tell her parents or family members that she is pregnant would be willing to go in front of a judge and a bunch of strangers and tell them of her dysfunctional situation. I know for a fact that there are many teenagers out there who would rather die than confront relatives, friends, parents or strangers who would be disapproving of what they have done and of their situation. Anyone who works with teenage pregnant girls can tell you the risk of suicide, botched abortion attempts (sometimes even conducted by a fellow teenager) and even as evidenced recently in a case in Delaware, attempted infanticide. As you have already stated in your bill, teenagers may not always think clearly. Situations that to many adults may seem tough but not insurmountable can seem insurmountable to a teenager. They may truly feel that their life is not worth living anymore.

In my experience, teenagers with unwanted pregnancies who come from loving households do eventually tell their parents. I cannot imagine the loving parents of a teenage girl not wanting their daughter to get all the medical facts so that she can make the best decision about her own health, body and reproductive future. The fact is, she is five times more likely to die if she carries the pregnancy to term than if she has a legal first trimester termination of pregnancy. I cannot imagine loving parents forcing their daughter to make the decision one way or another that so heavily impacts on her health and her future. In my experience this does not happen. In the opposite situation when teenagers do not come from loving homes, sometimes the situation is so dysfunctional and so bizarre it is not feasible for the parents to participate in the decision making. It is these girls that are at risk with this bill. They are at risk and if this bill passes it is just a matter of time before one of them dies as a result. We have already seen this happen in Ohio. There a couple who spearheaded a similar law in Ohio requiring parental consent for teenagers to receive an abortion lost their own daughter to an illegal, botched abortion. They changed their point of view 180 degrees, but at what cost??

Page 3 Written testimony

I have included with my testimony some statistics for you, a copy of an oath based on the Hippocratic Oath which has been adopted by the AMA that illustrates succinctly the importance of confidentiality. Whether or not you pass this law, I will not violate this oath with my patients, and I think that you will find a similar response from other physicians in my association. You can call it a misdemeanor, you can call it a felony, you can put me in jail. I need to act in the best interest of my patient. I welcome parents and other interested parties to help me with this commitment to my patients but I am realistic that sometimes relatives including parents do not have the patient's best interests at heart. It is those patients for whom I am the only advocate and if I betray them, who do they have left? We have had many examples in the past where the interference of big government, or legislators and well-meaning community members has resulted in disaster. I cannot support this bill and I have urged all members of the Alaska State Medical Association to do the same.

Sincerely,

Cynthia Brooke M.D.

urgent

f a c s i m i l e

To: **Representative Green**
Company:
Fax Number: +1 (907) 465-4316
Business Phone:

From: **Marianne D. Mills**
Fax Number: +1 (907) 586-3204
Business Phone:
Home Phone:

Pages: 1
Date/Time: 3/5/97 5:22:52 AM
Subject: CSHB37 and HB65

On behalf of all members of the League of Women Voters of Alaska, I urge you to oppose CSHB37 and HB65. We believe that public policy in a pluralistic society must affirm the constitutional right of privacy of the individual to make reproductive choices. Please stop this attempt at governmental intrusion into this very private issue between a woman and her doctor.

Respectfully submitted,
Marianne Mills, State President