



Planned Parenthood®

# Monday *MONITOR*

Monday, May 12, 2008

Contact: Michelle Trupiano – 573.424.8717 (cell)

## FINAL WEEK OF SESSION: HB1831 & SB1058 STILL IN PLAY

**SB1058** (Mayer) remains on the Senate Informal Calendar for Perfection and **HCS HB1831** (Onder) has been referred to Senate Governmental Accountability & Fiscal Oversight having passed out of Senate Judiciary Committee last Monday night on a 4:3 vote. The House bill is scheduled for a hearing on Monday at 1:30pm in the Bingham Gallery. While the most outrageous elements of the 'coercion of abortion' definitions were removed in the House Committee substitute, all of the elements remain in the Senate bill. The op-ed on the back of this issue helps explain the impact this bill would have on rural Missouri women and families.

Senators should know that Missouri already has some of the strictest regulations in place concerning abortion, albeit it one of the safest medical procedures performed in the United States. Checks are already in place to ensure women are not coerced into any decision and receive all options counseling—parenting, adoption or abortion. At the same time, the 2008 Missouri Prevention First Act—which would safely reduce the numbers of abortions in Missouri through better access to contraception and sex education—languishes in committee without a hearing.

Senators should vote **NO** on both HB1831/SB1058; they do nothing to prevent unintended pregnancy—the reason women are confronted with the abortion decision in the first place.

## REVELATION? ANTI-ABORTION LOBBY IS ANTI-CONTRACEPTION

The American Life League is promoting a new campaign against birth control that equates hormonal contraception—medication that helps prevent pregnancy—with abortion. The **Monday MONITOR** has for many years been keenly aware that the anti-choice lobby is not just against abortion, but will make every effort to prevent women—married or single—from obtaining contraception that can help them prevent unintended pregnancy.

Since the use of birth control pills became legal in **1965**, there have been well-organized campaigns to limit access or make it illegal once again. This summer the American Life League will encourage supporters to protest the pill. Their belief that protesting birth control will prevent the need for abortion demonstrates how out of touch these extremists have become.

## MAY IS NATIONAL WOMEN'S HEALTH MONTH

There has been much talk about protecting women this session, yet we have seen elected officials time and again fail to make real improvement in women's health while attempting to make political headlines. As healthcare providers, we know that many of the leading causes of death among women can be successfully prevented or treated if the warning signs are caught early—including breast and cervical cancer. Missouri women continue to lack the necessary access to screening services needed to save their lives.

Another issue that has simply not gotten the attention it deserves is the need of families to receive information about the HPV vaccine—which could give the next generation a better opportunity to win the fight against cervical cancer. Once again, the leaders in Missouri are comfortable withholding medical information that could have a significant impact on the health of Missouri citizens.

This session has passed without passage of one bill that will prevent unintended pregnancy. With all the talk about protecting women—one might expect to find a piece of legislation that protects women's health, but it's missing from the results of 2008. This final week falls during National Women's Health Month; Planned Parenthood affiliates in Missouri urge Missouri Legislators to set aside politics and create policy that really improves the health of the women they represent and care about.

## **PLAYING POLITICAL GAMES IN DOCTORS' OFFICES**

*By Kellie Freeman Rohrbaugh*

Over 700,000 Missourians don't have access to adequate health care coverage. The fact that women experience this disparity more intensely than men, is further compounded if they live in rural Missouri. Politicians in Jefferson City just don't understand the struggles of women and families living in "outstate Missouri."

In order to access health care, rural Missouri women make an appointment, often well in advance, make sure they have time off work and childcare, and then fill the gas tank for the long ride into the doctor's office. The last thing anyone wants to deal with is more politicians and lawyers telling them how and when to talk to their doctor.

But it seems another aspect of women's health care has just gotten more complicated.

In April the Missouri House passed a proposal which includes a laundry list of provisions restricting abortion -- many of which will have a disproportional impact on rural women.

Missouri already has some of the nation's strictest laws regarding abortion. One of these is a 24-hour waiting period between counseling and the procedure. Right now, women living in rural Missouri can talk to their own physician before meeting with the doctor who will perform the procedure. This proposal takes away that option by mandating that the counseling and abortion care be done by the same physician. Living in a rural area this will cause delays of several days or even weeks -- pushing a woman's procedure later into her pregnancy. This is not good medical practice and it is awful public policy.

The action by the House forces politics further into the exam room by requiring doctors and counselors to use brochures and videos produced by state bureaucrats. Another outrageous provision forces health care workers to post signs that carry false promises of state-backed assistance in carrying a child to term and providing for that child once born.

A responsible government should promote medically accurate information for women to make responsible decisions. Bureaucrats feeding doctors lines to recite isn't going to help women get the care they need. The government should not invade the privacy of the doctor-patient relationship -- nor order women where to go for their medical care.

Perhaps the most egregious part of the process has been the sponsors going on and on about how much they care about women's health. They certainly don't think women can make their own decisions because the proposal actually takes away the rights of women who have been victims of domestic abuse or even rape.

The bill redefines coercion in this way, if a woman facing an unintended pregnancy reveals that she is the victim of domestic abuse or even rape, it becomes a crime for the doctor to provide her with abortion care. It is telling that most domestic violence experts are opposed to this provision, and are asking "how does your status as a battered woman take away your ability to make up your own mind?"

There's nothing in the proposal that addresses the real issues that women who are victims of rape or abuse face. It just takes away their ability to act on their own behalf in the doctor's office.

The idea that women are being forced into abortions by abusers is entirely false. Missouri statute already requires women to sign a consent form stating that her decision is free and voluntary. But beyond that measure, Planned Parenthood's trained staff goes through medical and social histories with each patient to determine that it is her own decision to have an abortion. If at any time a counselor determines that there are pressures from someone else, the procedure is not performed. Like all health care providers, Planned Parenthood is subject to mandatory reporting policies, and required to report sexual assault or domestic abuse.

This plan will infringe upon the doctor-patient relationship and further restricts abortion care in Missouri. Using emotionally-charged language hides the proposal's true intentions and further burdens victims of domestic abuse. It does nothing to help women in need and instead is merely using scare tactics to win elections.

If the political leaders in Missouri were serious about reducing the need for abortion, they would not enact measures that put further strain on rural women and victims of domestic violence who are seeking health care. It's time to put prevention first and focus on common sense solutions such as increasing access to contraception and other family planning services.

-----  
*Rohrbaugh is public affairs director of Planned Parenthood of Southwest Missouri.*  
-----

Copyright (C) 2008 by the Missouri Forum. 5/08