



Monday *MONITOR*

Monday, May 5, 2008

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SENATE HPV VACCINE INFORMATION BILL PASSES OUT OF HOUSE COMMITTEE !!

In a bit of really good news for preventive health and the battle against cervical cancer, **SB778** (Justus) was approved by the House Health Care Policy Committee and referred to Rules Committee. This bill mandates that MO-DHSS send information to the parents or guardians of all females entering the 6th grade about the connection between HPV and cervical cancer and the availability of the HPV vaccine. This bill does not require the vaccine for admission to school and applies only to public school students.

HB1831—ABORTION RESTRICTION ACT OF 2008—HEARD IN SENATE JUDICIARY COMMITTEE

HB1831 (Onder) was heard in Senate Judiciary Committee last Monday night, but no vote was taken. Missouri already has some of the most restrictive laws surrounding the issue of abortion; this would seek to add even more burdensome steps for women and doctors and should be voted down.

DRUG MONITORING BILL INADVERTENTLY INCLUDES MIFEPRISTONE

Due to a clerical error, a bill sponsored by Sen. Champion and designed to track the sale of controlled substances and cold medicines at pharmacies would have labeled mifepristone (sometimes referred to as "RU-486") a controlled substance like morphine. The error was corrected, however media coverage in Springfield—the Senator's home town—compounded the error by confusing mifepristone with emergency contraception (sometimes referred to as the 'morning after pill'). Mifepristone is an abortifacient not available at the pharmacy; emergency contraception, available at the pharmacy, is birth control and will not affect an established pregnancy. *See the first Letter-to-the-Editor from Jean Twitty on the back of this issue.*

MAY 7 IS NATIONAL PREVENT TEEN PREGNANCY DAY

In it's 10+ year history, the National Campaign to Prevent Teen and Unplanned Pregnancy has reviewed research about parental influences on children's sexual behavior and talked to many experts in the field, as well as to teens and parents themselves. From these sources, it is clear that there is much parents and adults can do to reduce the risk of kids becoming pregnant before they've grown up. Presented here are "ten tips" - many of which will seem familiar because they articulate what parents already know from experience. Research supports these common sense lessons: not only are they good ideas generally, but they can also help teens delay becoming sexually active, as well as encourage those who are having sex to use contraception carefully.

1. Be clear about your own sexual values and attitudes
2. Talk with your children early and often about sex, and be specific.
3. Supervise and monitor your children and adolescents.
4. Know your children's friends and their families.
5. Discourage early, frequent, and steady dating.
6. Take a strong stand against your daughter dating a boy significantly older than she is. And don't allow your son to develop an intense relationship with a girl much younger than he is.
7. Help your teenagers have options for the future that are more attractive than early pregnancy and parenthood.
8. Let your kids know that you value education highly.
9. Know what your kids are watching, reading, and listening to.
10. These first nine tips...work best when they occur as part of strong, close relationships with your children that are built from an early age. Strive for a relationship that is warm in tone, firm in discipline, and rich in communication, and one that emphasizes mutual trust & respect.

For more information, go to: http://www.thenationalcampaign.org/parents/ten_tips.aspx

AND MAY IS NATIONAL WOMEN'S HEALTH MONTH

MORE FROM THE 'LETTERS-TO-THE-EDITOR' MAILBAG

NO EXCUSE FOR SLOPPY REPORTING

Springfield News Leader—May 3, 2008

Re: "'Morning after' pill restriction said to be error". That's funny. The biggest error on display in this article seems to be the reporter's inability to distinguish between RU-486 and "the morning after pill" also known as Plan B, two totally different drugs designed for different purposes.

I recognize that the article was written to express Sen. Norma Champion's dismay that RU-486 was inadvertently included among a list of controlled substances in a bill she authored. Unfortunately, those at the News-Leader responsible for content, accuracy, and headlines do not take their profession seriously. A quick Internet search or survey of his female colleagues was all it would have taken for the reporter, Mr. Chad Livengood, to get it right.

No matter how you feel about RU-486 or Plan B, there's simply no excuse for this kind of sloppy journalism. Reporters who don't understand the issues they're assigned to cover should educate themselves before they rush to print.

Jean Twitty, Springfield

ANTI-ABORTION COERCION BILL COULD REVICTIMIZE WOMEN

Columbia Tribune—April 29, 2008

Everyone can agree that coercion is bad. House Bill 1831, an anti-abortion bill that recently passed out of the Missouri House of Representatives, creates a new crime of "coercing" a woman to have an abortion. Sounds good, right?

What supporters of this bill don't want you to see is that this bill is unconstitutional and could further victimize the women these legislators feel they must "protect." If you can get past the ideology that women are incapable of making informed decisions and need government "protection," you'll see that the bill criminalizes some speech between the woman and her partners or family. In addition to this unconstitutional language, the bill defines "coercion of a woman" broadly, including existing crimes, such as stalking or domestic abuse.

A sentence buried in the bill could have major repercussions for women in violent situations: It says, "The assent of a coerced woman shall not constitute consent." And with those little words, women who have been victims of crimes are considered "coerced" and are no longer allowed to give consent for an abortion.

Let's be frank: Removing the right of a woman to choose a legal medical procedure does nothing to prevent coercion or protect her from harm in an abusive relationship. This bill re-victimizes women in difficult situations by removing options. The authors of this bill are not as concerned about women's safety as they are about coercing women to give birth against their will.

Fred Williams, Columbia

PREVENTION A MORE COMMON-SENSE APPROACH

Columbia Tribune—April 28, 2008

I am outraged to see that Missouri legislators have once again spent their time and energy on passing more needless barriers to women's abortion care rather than focusing on the only proven way of decreasing abortions: Prevention!

I don't think anyone in this state wants to see abortions become more dangerous and inaccessible to women, but that's what HB1831 has done. This anti-abortion bill passed out of the House of Representatives on Monday. The mandatory delays in the bill, termed by supporters as a "reflection period," will only push women further into their pregnancy and make the procedure more dangerous and expensive. If we want fewer abortions in our state, we need to start talking about prevention. Access to family planning services, contraceptives and education are essential in the fight to prevent unplanned pregnancies. And yet the legislature has not only ignored these key components of prevention, it continues to promote the Alternatives to Abortion program, which forbids funding for any kind of family planning, including contraception.

Isn't it funny that the very people who talk about how they want to decrease abortion in our state are the same ones who refuse to recognize the importance of contraception and comprehensive sex education in preventing the unplanned pregnancies that they so enjoy regulating? It's time to stop buying into the rhetoric and start looking at serious, common-sense approaches to decreasing abortions. It's time to focus on prevention!

Lara Underwood, Columbia