

Elizabeth Cover
Senate Bill 23 – Six-week Abortion Ban
Opponent Testimony
Ohio House Health Committee
March 23, 2019

Good afternoon Chairman Merrin, Ranking Member Boyd, and members of the House Health Committee. My name is Elizabeth Cover and I oppose Senate Bill 23, the heartbeat bill.

As a disclaimer, please note that my testimony here today is reflective of my own convictions, and not necessarily those of my institution. I am here today to provide testimony in opposition of Senate Bill 23 and I thank you for the opportunity to do so.

A woman's choice to have an abortion is a decision she, and only she can make. It is a decision she should be able to make on her own free will, without feeling pressured or facing intimidation. A woman can decide to have an abortion for multiple reasons; maybe her pregnancy was a product of rape or incest, maybe she became pregnant despite using contraception, or maybe she just doesn't want to be a mother at this point in her life.

I believe that a woman should not have to experience trauma in order to exercise what is currently a constitutional right. This philosophy is subconsciously written into legislation with the heartbeat bill being no exception. Why must a woman's life be in danger in order to lawfully obtain an abortion? Why must she experience trauma in order to validate her decision to terminate a pregnancy? Without fail, it's a prerequisite to all legislation, ironically pertaining to woman's health, that her life must first be in danger.

I work as a registered nurse in an intensive care unit. I have cared for women who have had to terminate wanted pregnancies for medical conditions that were irreversible. I held a woman's hand while she wept for the loss of the life she so badly wanted. It was out of her control; as badly as I wanted to help, it was out of mine as well. All I could do was sit with her and allow her to grieve. I listened as she blamed herself. I listened as she reminisced on her first trimester, and how her second trimester went so smoothly. But nothing prepared her for the third – and the unwarranted events that brought us both together at that moment. In the silent moments, I couldn't help but think to myself that I hope she never has to see any anti-choice rhetoric in regard to abortions that occur in late pregnancy. I hope she never has to see the signs protesters carry that equate abortion to infanticide. A part of me couldn't help but be thankful for our state's legislation, and that she wasn't forced to carry her unviable pregnancy to term. And a part of me worried about her, knowing that when she leaves the safe confines of the hospital she will be entering a world that makes it exceptionally harsh for women who have had abortions. I hope she knows it was not her fault. And I hope she knows I think of her often.

I hope she knows that despite this dangerous law passing the Ohio Senate and now onto the House, she is not a monster for having an abortion. She is not alone. And I hope she knows that had she decided to have an abortion upon finding out she was pregnant, she is still not a monster and she is still not alone.

We are your sisters, your daughters, your best friends, your co-workers, and your neighbors. We are fighting for our right to make our own decision about our bodies. Banning abortions do not lead to fewer abortions; they lead to unsafe abortions.

Our state has seen five general-assemblies that have considered passing a six-week abortion ban. Harsh legislation has a negative impact on women's health and perpetuates the negative stigma that already surrounds women's health. To be on a constant defense of an issue that is already a constitutional right is tiring, to say the least. Watching this legislation unfold – based around a decision our state is attempting to make on a woman's behalf, is discouraging at times. But I refuse to give up.

You see, there is currently a war between my womb and people I have never met before. Over a bill that is stated to be founded on valuing human life. But it does not mention the talk that once this human life is born, they are three times more likely to die during the first year of life if that infant is black¹. And if that woman who carried the child is black, she is three to four times more likely to experience pregnancy-related death than white women in the state of Ohio². Senate Bill 23 and its supporters cannot possibly state it was created on the basis of valuing human life when it fails to address racial disparities of birth outcomes in Ohio, in addition to its high rates of both infant and maternal mortality that predominantly affects minorities of our state. The United States is proving itself to be simultaneously the most expensive and one of the riskiest of the industrialized nations in which to have children. The Senate majority passed this law in the name of valuing the unborn human individuals' life – despite the fact that they still have a long way to go for the already born human individuals, who are in dire need of legislative attention. Something we could all be discussing now.

I work as a registered nurse. In my practice, I have yet to see a politician at the bedside, dictating the patient's next course of action with the medical team. But maybe that's because I don't work in women's health.

I urge you to please think about what this bill will mean for the state of Ohio. The medical providers our state will lose. The women who will feel betrayed. Please do not allow the media's rampant use of extreme language and hyperbole surrounding abortion to make you feel uncomfortable when talking about basic medical care.

Thank you,
Elizabeth Cover

¹ <https://odh.ohio.gov/wps/portal/gov/odh/media-center/odh-news-releases/2017-ohio-infant-mortality-report>

² <https://www.americanprogress.org/issues/women/reports/2018/06/22/452673/fast-facts-economic-security-women-families-ohio/>

