|  |  |
| --- | --- |
|  | **LEAGUE OF WOMEN VOTERS® OF OHIO**100 E Broad Street, Suite 13100 • Columbus, Ohio 43215Phone (614) 469-1505 • Fax (614) 469-7918www.lwvohio.org |

**Testimony on Senate Bill 23, Prohibit Abortion—Detectable Heartbeat Act**

**Before the Senate Health, Human Services and Medicaid Committee**

**The Honorable Dave Burke, Chair**

**Peggy Ann Berry (PhD, RN, COHN-S, ) LWVO Healthcare Specialist**

**February 26, 2019**

Chairman Burke, Vice Chair Huffman, and members of the committee:

I am Peggy Berry, a health professional testifying on behalf of the League of Women Voters of Ohio.

The League is a strictly nonpartisan organization and does not endorse political parties or candidates. As a member-driven, grassroots organization, we do adopt positions for advocacy through member study and support.  The League’s position on reproductive choice was adopted in 1983, and we have been staunch supporters of the constitutional right of privacy of the individual to make reproductive choices since that date.  Our study at that time revealed the historical perspective on abortion, going back to the 13th century, when Anglo-Saxon civil law designated the legal beginning of fetal life to be quickening (fetal movement), and a woman had a legal right to terminate a pregnancy up to that point, much as Roe v. Wade assured.

Coming forward to 1973, the U.S. Supreme Court’s ruling in *Roe V. Wade* legalized abortion as a constitutionally protected fundamental right.  The *Roe v. Wade* ruling did not give states the prerogative to restrict access to abortion during the first trimester.

Senate Bill 23 would unconstitutionally restrict abortion access during this first trimester.  At this point in time, no fetus is viable at such an early stage of development. Increasing restrictions would deny many of Ohio’s most vulnerable women fundamental control of their reproductive lives.  The percentage of unintended pregnancies is highest among the women who are least able to fully care for a child.  To deny them the right to end their pregnancies in that first trimester is a travesty of justice.

This proposed bill does not makes exceptions for rape, incest, or severe mental illness—all conditions that should evoke our compassion, not a one-size-fits-all legalistic imperative.   What woman of child-bearing age would want to live in a state that does not respect her reproductive choices or needs?

An additional argument against this bill is that the State of Ohio would be saddled with the costs of defending the bill, because it is practically guaranteed that it will be challenged in court.  Not only will the State of Ohio incur the legal challenge, but the State of Ohio currently has no provisions for care that moves children into foster care.

There are many positive things that can be done to cut down the number of unintended pregnancies.  These proactive actions include increased access to pregnancy prevention programs, emergency contraception, and comprehensive sex education.  It would be far better for this committee to be an advocate **for** better reproductive health care and family planning services than to be against access to abortion.

We respectfully ask that you vote against this bill.  As a professional nurse and educator, I am accustomed to discussing healthcare issues and am happy to take any questions you may have.