

**Public Testimony on SF359**  
**Binnie LeHew MSW, LISW**

**March 20, 2018**

I have worked in the field of clinical social work for over 37 years, and within public health for 20. I believe it is important to use scientific evidence to inform public policy, since it impacts the population at large. As we know, advances that have been made in health-related fields over the past centuries are based on sound, peer-reviewed evidence. We all live lives that are longer, healthier and safer because of research that improved practice. This evening, I will focus my comments about the mental health effects of abortion and what research has concluded.

In 2008, the American Psychological Association convened a Task Force on Mental Health and Abortion (<http://www.apa.org/pi/wpo/mental-health-abortion-report.pdf>). The task force reviewed studies conducted during an 18-year period to understand if abortion causes harm to women's mental health, how prevalent mental health problems are among women in the US who have had abortions, and what might predict individual variation in women's psychological experiences following abortion.

The final report was thorough and reviewed over 83 studies. Before I summarize the conclusions, there are two important points worth noting since clearly, decisions to have an abortion are complex. First, psychological reactions to abortion differ if the pregnancy was planned or wanted. Second, a woman's psychological experience of an abortion is not uniform, and varies by the circumstances that led up to the pregnancy; the reasons for, type, and timing of the abortion; events and conditions that occur after the abortion; and the larger social-political context in which abortion takes place.

Given that, these were the task force conclusions:

- Among women who have an unplanned pregnancy, the risk of mental health problems is no greater if they have a single first-trimester abortion than if they carry the pregnancy to term.
- While some women experience sadness, grief, and feelings of loss following termination of a pregnancy, others experience clinically significant disorders. However, the task force found no evidence to support the claim that having an abortion causes later mental health problems.
- Across studies, the strongest predictor of post-abortion mental health was good mental health prior to the abortion.
- There are some factors that do influence negative psychological responses following an abortion. They include:
  - a. perceptions of stigma surrounding having an abortion, the need for secrecy, and low social support for the abortion decision;
  - b. a prior history of mental health problems;
  - c. personality factors such as low self-esteem and use of avoidance and denial coping strategies (e.g., drug or alcohol abuse); and

- d. the unique characteristics of the particular pregnancy, including the extent to which the woman wanted and felt committed to it.

In my clinical practice, I worked with women who both contemplated and had abortions. They dealt with the emotional, spiritual and circumstantial factors in that process to find a pathway of peace with their decision. Those experiences taught me that abortion is a highly personal, complex decision that a woman makes and it may impact her in different ways. To pass a law such as SF359 based on the potential harm it may cause someone when there is not sufficient evidence to back that claim is bad public policy.

My name is Maeve Callan, I live in Des Moines and have my PhD in Religion from Northwestern University. <sup>an Iowanas</sup> As a scholar of religion, I'd like to note three things in particular.

1. Not all of us are religious, and our country is founded on the legal separation of church and state for a great many reasons. Given the central role of particular Christian beliefs in this bill, the courts will almost certainly rule that it violates the First Amendment's Establishment Clause—after great cost to Iowa's taxpayers.
2. Not all of us who are religious are Christian, and religious teachings about when life begins vary considerably. According to Jewish law, "personhood" begins at birth. Specifically regarding abortion, quoting the Jewish ethicist and University of Chicago Divinity School dean Laurie Zoloth, "If the mother's life, or physical or mental health, is at risk (...) abortion is not only permitted, it is mandated" (SR 37-38). Islam teaches that the fetus gains legal rights when it gains a soul, 120 days into development. Even after that 4-month period, abortion is morally preferred if the mother's life is at risk, or if the pregnancy is harming a breastfeeding child, or if the fetus has significant health concerns of its own. Virtually every major world religion—including multiple forms of Christianity—agrees that if a pregnancy endangers the mother, abortion is the morally preferred option.
3. Not all of us who are Christian are anti-choice. Even Catholicism has a complicated history on this issue. For much of Catholic history, abortion was regarded as morally acceptable if it occurred prior to "quickening," a belief similar to Islam's. Multiple medieval Catholic saints were said to perform miraculous abortions, with thanks given to God. Penitentialists found abortion a lesser offense than the illicit sex that caused a pregnancy in the first place.

In the words of Daniel Maguire, Professor of Religious Ethics at Catholic Marquette University, "To criminalize a right that is grounded in the world's major religions is criminal itself. It is also a form of religious persecution. Criminalization is also lethal in its effects" (SR 6). This bill would greatly increase the number of women and girls who suffer grievously and die from pregnancy complications. Do not deny women and girls access to medically-necessary, Constitutionally-protected treatment, treatment that virtually all the major world religions support. Thank you.

I have attended previous hearings on variations of this bill and listened to several speakers support it explicitly because of their religious beliefs, invariably their Christian beliefs. Yet there is neither scientific nor religious consensus on when life begins, and this bill would not only undermine the basic personhood and bodily autonomy of women and girls throughout the state of Iowa, it would also jeopardize their safety and well-being, denying them medically necessary treatments that could save their lives.

House Human Resource Committee Comments on SF 359

I attended the Iowa Senate discussion and vote on this bill, the HR subcommittee hearing and HR committee meeting. I heard those in support of this bill provide emotional testimony about family members dying as their heart stopped beating and the thrill of hearing a heart beat upon becoming pregnant.

These are feelings many of us have experienced. But that is exactly what they are, emotions and feelings.

1. The fact is abortions are legal in the United States and in many other countries.
2. The fact is lowans with financial means will be able to continue to get safe abortions.
3. The fact is lowans without financial means but wanting or needing an abortion may get an illegal abortion, attempt a self abortion resulting in injury or death.
4. The fact is the time you have spent on this legislation could actually have been spent on bills and that actually protect life, the lives of our children, grandchildren and our neighbors children.
5. The fact is some of you have voted in favor of legislation in 2017 or 2018 expanding gun rights to include carrying concealed weapons in hospitals, school playgrounds, shopping centers, court houses, bars, and even on snowmobiles making it less safe for Iowa families and endangering the lives of our children.
6. The fact is some of you have supported legislation placing limits on medical malpractice awards. These limits would never come close to covering the costs of caring for severely disabled child.
7. The fact is some of you supporting this bill have done nothing to implement reasonable gun safety measures, background checks or ban weapons of war which would help protect lives the of our children.
8. The most disturbing fact is that I watched those voting in support of this bill, even though it has no exceptions for even a 9, 10, 11 year old child who becomes pregnant as a result of incest, or a rape victim who becomes pregnant as a result of an assault, or a pregnant woman who learns she has a fetal anomaly, vote for this bill mostly without hesitation. That vote said to me this bill is actually NOT at all about LIFE. ~~It is all about politics.~~

*of males. You & your doctor, without legal restrictions make your health care decisions. Why should the women of Iowa expect anything less*

*ANNE Hoffmaster*

## Maggie DeWitte: Testimony of SF359 Iowa House Human Resources Committee

March 20, 2018

My name is Maggie DeWitte and I am the Executive Director for Iowans for LIFE and a founding member of the pro-life coalition. Thank-you for this opportunity to speak.

I am here today to speak on behalf of those who cannot speak; to state what you all sitting here know to be true. When there is a heartbeat, there is a life. And if there is a life, that life deserves protection and the rights of all human beings.

This is not an issue of religion. This is not an issue of circumstances of how a child was conceived or the world in which they will be born into. This is an issue of civil and human rights.

Dr. Alveda King, niece of Dr. Martin Luther King states: "Abortion and racism are both symptoms of a fundamental human error. The error is thinking that when someone stands in the way of our wants, we can justify getting that person out of our lives. Abortion and racism stem from the same poisonous root, selfishness."

Embryology textbooks tell us that the human heart is the earliest functioning organ; as a mother of four children, I can tell you the glorious sound of that first heartbeat. And it wasn't glorious because I wanted those children or planned for those children or that I had a husband and support. It was glorious because it is the signal that new life is present. New life with potential, with hope, with a soul and created for a purpose beyond all our imaginings.

We have no right to snuff that life out. As a woman I believe strongly in having the right to make decisions regarding my own body; but my right to control my body ends when it infringes on another body- the life of the unborn child. A child with her own beating heart, her own DNA, completely separate from her mother.

Don't disregard science in order to continue to spread a culture of death brought to us by the abortion industry. In Iowa, death is determined when the respiratory or circulatory systems stop functioning. Its logical to conclude that when those systems ARE functioning there is a heartbeat, and the person is alive. And if alive, that baby, that unique human person, deserves the right to be protected.

Yes, ladies and gentlemen, you should listen to your heart. But even more, listen to your head. Do what you know to be the right thing- move this bill forward to the house floor and vote YES to a beating heart. Be a hero. Stand up for the little guy in the name of human rights. Stand up for the little guy in the name of justice.

I hope that by sharing my journey of understanding abortion and the women who get them, I will help you understand that abortion is a result of an underlying problem -- an unwanted or dangerous pregnancy -- not the problem itself. If you truly want to decrease abortions, you need to address the causes. I grew up Catholic and did not question the abortion issue as it was presented in black and white. But when I went to college and met more people who shared their circumstances with me, I realized that the issue was complex. Too many of my women friends were coerced into having sex, some did not know about contraception and still others had contraceptive methods fail.

When I became a family physician and was given the honor and privilege of being able to talk to women about their circumstances, I gained even more insight. There were women who were concerned about the financial pressures of pregnancy and their ability to care for their current children, there were those who were in unhealthy relationships who were scared, there were those who were raped, those whose mental or physical health was threatened by pregnancy and those who had reasons they couldn't/didn't share.

As the Medical Director of the ICFMC, I have seen how inequalities in health care, education and employment have further disproportionately affected women. The cuts to PP last year have resulted in a 35% increase of women needing our gynecology services putting a strain on already limited resources.

But what drove home the point of the personal and medical decision-making involved in this choice was my own experience with terminating a pregnancy. With my second pregnancy, I was found to have an ectopic pregnancy -- a life-threatening condition. In processing this news and making the decision to terminate, I realized how personal this decision is. I saw that I had no right to make the decision in another woman's case about her ability to carry on a pregnancy. I was fortunate to have trained physicians who knew how to deal with this situation but if this current bill is passed, it will threaten the education of physicians in this state and safe options may not be available to women in my position. Because a law can't take into account all of the possible contingencies, it needs to leave that decision-making power in the hands of the people who have the medical knowledge as well as the understanding of a woman's unique experience.

This SF 359's fetal heartbeat amendment is an expensive proposal that will only result in worse health care for women, wasted state financial resources, and increased maternal mortality. I have spent my life doing those things that HAVE been shown to decrease the abortion rate by providing health care to women, volunteering in schools to improve education and supporting victim advocacy programs. You have a choice -- to improve the health of Iowans by defeating this bill OR to send a message to young women, like my daughter here, that their lives and health don't matter - that if they are raped, they will just have to carry the baby to term. I hope you will join me in my quest to make abortion rare and unnecessary by working to address its underlying causes.

*If you are interested in truly knowing about the state of women's health in Iowa, I would be more than happy to discuss this with any of you. Cecilia Norris MD  
medicaldirector@freemedicalclinic.org*

## Jennifer Roush: Testimony of SF359 Iowa House Human Resources Committee

March 20, 2018

My name is Jennifer Roush, I am a nurse and the Director of Medical Services for Informed Choice of Iowa. I have been caring for pregnant women with unplanned pregnancies for the last 5 ½ year and have seen hundreds. Women who come to our clinics are supported and told that they are not alone and that we will be there for them every step of the way. This includes after the child is born. We help them obtain resources such as housing, counseling, transportation, baby items, and other financial resources for as long as they need this support. We are one of many organizations in this state that do this. We are committed to them succeeding as parents and individuals.

I have done hundreds of ultrasounds. I see those babies as early as six weeks with a beating heart, independent movement and their own organ systems. Ultrasound is a powerful tool for women to see the truth of what is going on inside their womb. I have had women say things to me like, "I'm not going to stop that beating heart", or "This changes everything".

In my personal experience I have never had a women say she regretted having her child. I have had them thank me and say that if they had not received the information and care that they did, their child wouldn't be here right now, and they are so thankful to have their baby. I have also seen many women struggling of the emotional fallout from an abortion if that is what they have chosen. I have seen patients come in battling depression, anxiety, suicidal thoughts that they relate back to their abortion experience. Taking a life is not healthcare. I urge you to please pass SF 359.

**Dr. Alan Moy: Testimony of SF359 Iowa House Human Resources Committee**

March 20, 2018

1. Introduction-CEO of CET, an adult stem cell manufacturer and Scientific Director and Founder of John Paul II Medical Research Institute, a non-profit that advances adult stem cells for finding cures for patients.
  - i). exclusive manufacturer of ASC for GE Healthcare and sold around the globe.
  - ii). Largest portfolio of ASC in the world.
  - iii). Published a landmark scientific paper last yr that makes fetal tissue & ESC obsolete.
2. Address the argument whether critical medical research and life-saving cures will be prevented if the commercial practice of trafficking of aborted fetal body part is prohibited.
3. There is no evidence that transplantation of aborted fetal tissue has cured disease.
  - i). Failure in Parkinson's and SCI.
  - ii). Fetal tissue is used for esoteric research.
4. People conflate current fetal tissue use in medical research with the historic use of established fetal cell lines that are used in vaccines and other current protein drugs.
  - i). established cell lines created years ago and are immortalized.
  - ii). Fresh fetal tissue not required to replenish those cell lines.
5. The notion that fetal tissue is good model of human disease is false.
  - i). A fetal biology is distinct from adult biology.
6. Lastly, there are better alternative tissues and cells to aborted fetal tissue in medical research.
  - i). most scientists regard fetal tissue lacking sufficient quality and difficult to source.
  - ii). Better cell lines – iPSC.
  - iii). Fetal tissue is available from miscarriages which is permitted.
  - iv). Jp2MRI has a consent form and protocol to collect fetal tissue from miscarriages: no interest and no profit.
7. Conclusion: There's no evidence that preventing the trafficking of aborted fetal tissue prevents important medical research and access to life-saving treatments. If the goal is to find life-saving cures for patients, then this legislative body should pass the IA Regenerative Medicine tax credit (HF2228) to support adult stem cell research, which was recommended back in 2011 by a government paid independent report. The bill not only provides life-saving cures but it ensures IA can effectively compete in a multi-billion-dollar regenerative medicine economy which creates advanced manufacturing and tens of thousands of high-wage jobs; expands research and educational opportunities of IA universities. Yet, this bill has been stalled for the past 7 years, while other states has provided our organizations financial incentives to re-locate.

Respectfully submitted

Alan Moy MD



## Sue Thayer: Testimony of SF359 Iowa House Human Resources Committee

March 20, 2018

My name is Sue Thayer. I live in Storm Lake. From April 1991 through December 2008, I worked as a Center Manager for Planned Parenthood. During my 17 years there, I managed the Storm Lake Center. I am speaking tonight in support of the Heartbeat bill.

During my job interview, I was asked what my thoughts were about Planned Parenthood's surgical services. Having already experienced the miracle of pregnancy and birth, I felt that abortion is wrong and shared my thoughts with the regional director who interviewed me. She countered that PP believes abortion is not murder as long as the fetus is not viable. I disagreed with that philosophy but was still offered the position and began my duties immediately.

While the two centers that I managed were family planning only, it was required that all clinic managers observe in the abortion unit. The first day I worked at the Des Moines Central center, I watched about 35 to 40 abortions, including at least one set of twins. At this time, ultrasounds were not routinely done so the length of gestation could be quite a surprise. Clients knew their cost would increase with each passing week, so they would not always be honest about their dates. This would result in sometimes challenging abortions of babies who were much older than what we had expected.

Filling in at one of the abortion facilities was difficult for me as I continued to believe that unborn babies are alive. With ultrasound becoming more widely used, it was obvious that a fetus was alive and moving right up to the procedure. The process of abortion included the sound of the suction machine, the sight of the torn bodies in the little glass bowl, the many empty faces of the moms. And it always ended in the death of a baby.

A hardened heart is a necessity to work in the abortion industry. I had one and it seemed so did those who worked daily in the unit. To do abortions consistently, one has to tell themselves that they are doing a good work, that somehow the death of a baby helps the mother. All while ignoring the dismembered limbs and tiny body parts of the baby.

When a patient is in the end stages of life, medical staff will use a stethoscope to check for a heartbeat. At the point they hear none, they declare the patient deceased. But as long as there is a heartbeat, the very symbol of life, the patient is considered alive. Common sense would dictate the same for all life, including unborn babies.

I am now the director of a pro-life pregnancy center and work to save babies from abortion. Our local churches recently gifted our ministry with a wonderful new state-of-the-art ultrasound machine. We can see an unborn baby not much bigger than a grain of rice who has a beating heart.

Over many years of doing pregnancy tests, I've heard every reason why a woman feels compelled to have an abortion. While I do understand and have compassion for those who are pregnant and desperately do not want to deliver a baby, I also have a very clear vision of what abortion at any stage is - murder. The end of a life.

This is why I encourage you to support the heartbeat bill. Thank you.

*Written Testimony of Kathi A. Aultman, MD FACOG*

*Associate Scholar with the Charlotte Lozier Institute*

*before the Iowa House of Representatives on the Heartbeat Protection Act March 20, 2018*

Members of the Iowa House of Representatives, thank you for allowing me to participate in this hearing today. My name is Dr. Kathi Aultman and I am speaking on behalf of The Charlotte Lozier Institute. I am a retired board-certified Ob/Gyn and a fellow of the American College of Obstetricians and Gynecologists with over 35 years of experience I performed 1st trimester suction D&C abortions and 2nd trimester D&E's abortions. I also served as a Medical Director for Planned Parenthood of Jacksonville from 1981 to 1983.

I have testified extensively at the state and national level including before the House Judiciary Subcommittee on the Constitution and Civil Justice on the Heartbeat Protection Act of 2017. I have spent my entire career as an advocate for women and their health.

When I entered medical school, I believed that the availability of abortion on demand was solely an issue of women's rights. During my residency I moonlighted doing abortions. As I examined the tissue after each procedure I was fascinated by the tiny perfectly formed limbs and organs but because of my training and conditioning, a human fetus seemed no different than a chick embryo to me.

I continued to do abortions without reservation while pregnant, but when I returned to the clinic after my delivery I was confronted with three situations that changed my thinking.

I had personally done three abortions on a girl scheduled that morning but when I protested, the clinic staff said I had no right to refuse her. I told them, that was easy for them to say. I was the one who had to do the killing. The second case involved a woman who when asked by her friend if she wanted to see the tissue replied "No! I just want to kill it!" I felt like saying, what did that baby ever do to you? The third patient was a mother of four who felt she couldn't afford another child. She cried throughout her time at the clinic. What struck me was the apathy of the first patient and the hostility of the second contrasted with the sorrow and misery of the woman who knew what it was to have a child. I had finally made the connection between fetus and baby and realized that the baby was the innocent victim in all of this. The fact that it was unwanted was no longer enough justification for me to kill it and I could no longer do abortions.

My views also changed during my practice as I saw young women who did amazingly well after deciding to keep their unplanned pregnancies, in contrast to those who were struggling with the emotional aftermath of abortion. That wasn't what I was expecting. I don't believe women can remain unscathed after killing their child. At some point, usually after childbirth or the inability to get pregnant, the realization of what they did hits them.

It wasn't until after I had my first child, that I regretted my own abortion. I wish there had been a heartbeat bill back then or that it had not been so terribly easy to get an abortion. I wish I had had more confidence in myself and my family. I believed the lie that if you are young and have an unplanned pregnancy it will ruin your life.

Our society has been subjected to extreme propaganda on this issue from "Pro-choice" advocates for years. We have convinced our young women that an unwanted pregnancy is the worst thing that can happen to them and that their right to reproductive freedom is more important than their baby's right to live. We have sanitized our language to make abortion more palatable. We talk about the "fetus" instead of the "baby" and "terminating the pregnancy" rather than "killing the baby".

We have moved further away from the idea that life is precious and closer to the utilitarian attitudes that destroyed so many lives during the last century. More and more we are embracing a culture of death that only values the strong and healthy.

I love to meet adults that I delivered, but it's always bittersweet because I am reminded of all the people I will never meet because I aborted them. It also reminds me that I am a mass murderer. Because we can't see who they will become, we feel justified in sacrificing babies in the womb for the people we can see.

I support the Heartbeat Protection Act because it uses the heartbeat, a very concrete sign of life that people can identify with, to define when the fetus should be protected. It will protect the lives of those who "Won't continue to be" unless we do something. They won't be here to cure cancer, to write a beautiful symphony, or to wipe a child's tears. One just has to look at the "Almost Weren't", whose mothers chose no to abort them, to get a glimmer of who they might become and how they might benefit society.

I think about my beautiful cousin whose Bangladeshi mother was raped by a Pakistani soldier. She survived her mother's abortion, was rescued by Mother Teresa's nuns and was adopted by my aunt and uncle. Perhaps we should ask those who were conceived through rape, if others like them should be denied protection under such an act.

We know from a scientific standpoint that the baby in the womb is a human being and not just a blob of tissue. Birth changes nothing but the baby's environment. What justification do we have to deny them personhood and human rights until after their birth?

I want to thank those who have supported this bill, for your vital efforts to protect those who have no voice and cannot protect themselves, and I thank all of you for listening to me.

## The Broken Yet Beating Heart of Our Nation

Thank you for taking the time to listen to our stories tonight. I'm sure there are other places you all would rather be, and I appreciate your time.

Often, in times of distress, we talk about life spinning out of control. But that still assumes a spiral -- something contained, something you can visualize -- I propose that you are faced with the task of making sense of incongruent angles -- where nothing is neat, orderly, or earthly known, and I do not envy you your task.

I am not here to speak to you of the viability of a baby -- or of when life starts--although I do have plenty to say on the subject, but there are others with different degrees than mine to speak to that. I am here to speak to you today about you. About your job, your heart, and your role within the American government. And to speak about me -- the person you are representing.

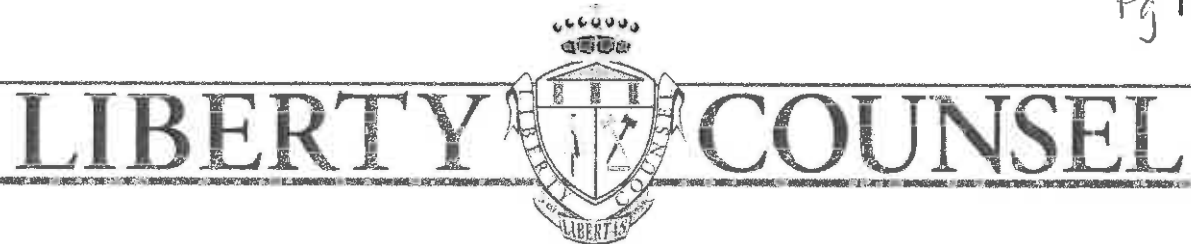
I will not make assumptions about your life, or about things that shaped your life, other than to say that you all have a heart that is beating. If your heart stopped beating, you could no longer be you. Does it make a difference if you are in these chambers, or at your home, or in the womb? I would say that it does not. A beating heart is a sign of life, and with that, the life is protected within our constitution. I am not a history major or a lobbyist or a fighter. I am a teacher. And with that, have always known that I need to teach students to critically analyze what is in front of them. To hypothesize and analyze the whole truth of a matter. Regardless of that matter. To deny the truth of a heartbeat is to deny a part of the equation.

Personally, I have a broken heart that still beats. There have been plenty of days that I wished it would stop. That I wished my life was over. That hasn't happened. But today I don't care about my heart. I care about the heart of my unborn child. The child I never held, whose heartbeat I never heard, the child that I wouldn't even agree was human until years later. I have had an abortion. My life has changed dramatically because of it.

Growing up I was always told that pregnancy, in early stages, was just a "bunch of cells". As a woman, as the mother of an unborn child, I can unequivocally say that is wrong. I hurt my baby. I killed my baby. Because I didn't have the facts. Because my government said it was ok. They said it was ok. Ok to kill my baby.

I believed that the laws were there to protect me, and that couldn't be farther from the truth. By passing or keeping laws saying to kill ANYTHING with a beating heart is okay,

you are taking humanity down a path of heartbreak. Please, vote for the heartbeat bill and not the heartbreak bill. While of the utmost importance, it's more than the baby's heart at stake. It's the heart of our nation and all we believe in. For our children's life. For their liberty, for their pursuit of happiness, and for all of our hope.



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Reply to: Florida

March 5, 2018

**Via Email Only**

The Honorable Linda Upmeyer, Speaker  
Iowa House of Representatives  
1811 N 8<sup>th</sup> St  
Clear Lake, Iowa 50428  
linda.upmeyer@legis.iowa.gov

RE: Liberty Counsel supports SSB 3143 and will defend if enacted

Dear House Speaker Upmeyer:

Liberty Counsel is an international nonprofit litigation, education, and public policy organization established in 1989. Liberty Counsel provides *pro bono* legal representation and services within our mission of advocacy for life, religious liberty, and the family. All of Liberty Counsel's services are provided at no cost. Liberty Counsel has appeared before the U.S. Supreme Court presenting oral arguments and has filed many briefs before the High Court and has also appeared numerous times before all levels of federal and state courts, including State Supreme Courts.

As founder and chairman of Liberty Counsel, I am pleased to offer the citizens of the State of Iowa a *pro bono* legal defense of SSB 3143 ("SSB 3143" or "Heartbeat Bill") should it be enacted. I urge the Iowa House of Representatives to pass this bill in defense of innocent, unborn human life.

SSB 3143 is an appropriate, necessary and constitutional recognition of the humanity of unborn children, consistent with the obligation of the State of Iowa to protect human life. A detectable heartbeat is the *sine qua non* of human life. The bill prohibits the act of abortion once an unborn child has a detectable heartbeat. The bill appropriately provides for an exception if the mother's life is "endangered by a physical disorder, physical illness, or physical injury, including a life-endangering physical condition caused by or arising from the pregnancy."

March 5, 2018

Liberty Counsel supports SSB 3143 and will defend if enacted

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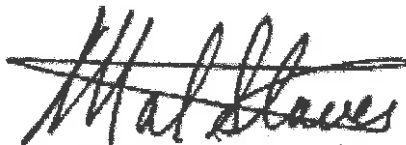
SSB 3143's recognition of the humanity of the unborn child is long overdue. While some might suggest that *Roe v. Wade*, 410 U.S. 113 (1973), prohibits such recognition, legal developments, medical practice, and scientific knowledge about the beginnings of human life have advanced so far as to call into question *Roe's* current viability as good law.

Liberty Counsel is aware that the fiscal impact of defending SSB 3143 is a concern. To help alleviate that concern, Liberty Counsel is prepared to reduce any fiscal impact of the law, including the cost in defending it from legal challenge, by offering a *pro bono* – free – legal defense of the law, once it is enacted.

Liberty Counsel therefore urges the Iowa House to pass this bill, and send it to Governor Reynolds' desk for her signature. Liberty Counsel is prepared to stand with you and the citizens of Iowa, to defend this bill at no charge to the taxpayers. We have the track record, litigation experience and the conviction necessary to prevail in such a defense.

If you have any questions about Liberty Counsel's experience in these matters, please feel free to contact my office via telephone at 407-875-1776. Thank you for your steadfastness and willingness to stand for human life.

Sincerely,

A handwritten signature in black ink, appearing to read "Mathew D. Staver". The signature is written in a cursive, somewhat stylized font. A horizontal line is drawn across the signature, crossing out the name.

Mathew D. Staver.†

CC:

**Via USPS:**

Governor of Iowa Kim Reynolds

1007 E Grand Ave.

Des Moines, IA 50319

Phone: 515-281-5211

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†Licensed in Florida and the District of Columbia  
MDS/tge

Kevin Kilcawley, PsyD  
Integrative Psychology Services  
Licensed Psychologist: License No. 001356  
National Health Service Provider

The claim that abortion does not hurt women is simply false, but I understand why the claim is made and why some might testify to its validity. After all, the American Psychological Association said the following in 2008:

“There is no **credible** evidence that a **single elective abortion**, of an **unwanted child, in and of itself**, causes mental health problems for **adult** women.”

I hope that we can come to understand what the APA is implicitly saying when we strip away its nuanced language. It will be important to do so, since the first meta analysis on the link between mental health and abortion was published in 2011, contradicting the APA’s 2008 claim. The authors combined the results of twenty two studies from 1995-2009, which included roughly 900,000 women from six different countries. The study showed the following:

Women with a *history* of abortion face a statistically significant higher risk of subsequent mental health problems, including suicidal behaviors, substance use, anxiety, and depression.

- 59% are at higher risk compared to women without a history of abortion
- 55% are at higher risk compared to women who gave birth to an unplanned pregnancy.

So what is the APA saying when using nuanced language, I find four qualifiers suspicious.

First: There is no *credible* evidence, simply means there is evidence, but in their judgement question credibility due to weaknesses in the study. But every study has weaknesses, that’s why there is a dedicated section titled the limitations of the study. The APA is just noting weakness is methodology.

Second: They say, a *single abortion*: They use this language because they know there is credible evidence that women with a history of multiple abortions (which account for 50% of abortions) is associated with subsequent risk.

Third: *Unwanted*, most cases the child is wanted, but ~~others around them don’t want them or are not supporting their pregnancy~~ <sup>but are coerced</sup> (coercion is happening) meaning if they had the resources, they would carry the child to term. (This ranges anywhere from 20-60 percent of abortions depending on different studies)

Fourth: *Adult women*, Because there is evidence that minors have more subsequent mental health problems following abortion. (15-30%)

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It is important that we be as objective as we can when examining the research, and leave our biases behind. Professor David Fergusson is good example of this who said the following when commenting on his 2006 study that was published in the Journal of Child Psychology and Psychiatry when finding that women who had undergone an abortion were 2x more likely to develop major depression, anxiety, substance use, and suicidal behaviors compared to women who had never been pregnant, and 35% higher than women who carried to term.

Quote:

*“I remain pro-choice. I am not religious. I am an atheist and a rationalist. The findings did surprise me, but the results appear to be very robust because they persist across a series of disorders and a series of ages.*

*Abortion is a traumatic life event; that is, it involves loss, it involves grief, it involves difficulties. And the trauma may, in fact, predispose people to having mental illness.”*

- David Fergusson

#### References:

Coleman, P.K. (2011). Abortion and mental health: quantitative synthesis and analysis of Research. *British Journal of Psychiatry. Sep;199(3):180-6. doi: 10*

Fergusson, D., Horwood, J., & Ridder, E.M. (2006). Abortion in women and subsequent health. *Journal of Child Psychology and Psychiatry. 47(1): 16-24*

My name is J. Peck Cr. Care physician practicing for Pg<sup>1</sup>  
past 15 years in Iowa. Born in Ames, graduated in  
nursing from DMAC, Bachelors from Drake, doctorate from  
DMU. ~~Also hold a masters of clinical research from~~  
~~Granger University~~, I am an Iowa citizen by choice and feel  
~~equated to~~ I should be treated with respect by this  
legislative body that was elected by Iowans. But that  
is not happening. I am being treated not only as less  
than by this body, but you want to make my health care  
decisions for me. I attended the hearing of SF 359 when  
it was passed out of committee. I listened to 1/2 truths  
and inaccurate ~~facts~~ from proponents of this bill. Rep Holt  
said that ~~the~~ ~~and~~ death is defined by a lack of a heart  
beat, therefore life is signified by the presence of a heart beat.  
But, per Iowa code that is only part of the definition of death -  
he excluded brain death, where in fact a beating heart is  
still present, but death has occurred. He then told of the loss  
of his 18 wk. fetus - this fetus died at 18 wks because a  
beating heart alone does not define life. Rep Salmon said  
that abortions are dangerous for the women and they suffer  
long term consequences "alone." This is also a falsehood.  
From Guttmacher Research a total of 431 ♀ died btw 1973-2012.  
In 2013 4 women died from complications of abortions.  
There were 893,000 abortions ~~performed in 2016~~ - that is a  
death rate of ~~1~~ 0.4 / 100,000 abortions. The maternal  
death rate is 17.8 women / 100,000 births. 700-900 die from  
pregnancy or child-birth related causes per year. Compared to  
those who have abortions, ~~the~~ ~~and~~ ~~the~~ ~~risk~~ ~~factors~~ ~~for~~ ~~death~~  
More over maternal demise is most commonly associated  
with being African American, having a low income,

and having an unplanned pregnancy. 1/2 of pregnancies in the US are unplanned, I had an unplanned pregnancy at age 16. I gave my child up for adoption. At the same time a close friend of mine became pregnant. I saw her drop out of school and struggle to raise a child on her own. Shortly thereafter 2 more friends became pregnant. They saw what my girlfriend and I had gone through and decided to have abortions. But it was illegal in Iowa, and I helped them travel to New York where they could obtain a legal abortion by a physician. None of these decisions were easy and we all experienced grief & sorrow. But we weren't alone, we all lead productive & fulfilling lives. And most of all, we have remained thankful that we had a choice and a voice in our and control over our bodies and decision making. This legislative body wants to take control of our bodies and silence our voices. I stand here as a voice for woman who want to be treated with the respect we have earned and want our voices heard.

Judy Peggan DO