

**Testimony of JT Hammons, Student at the University of Kansas, in opposition to  
House Bill 2253  
Senate Public Health and Welfare Committee, March 22, 2013**

Thank you Chairwoman Pilcher-Cook for allowing my testimony today. I would also like to thank the Senate Public Health and Welfare committee for hearing what I have to say today as well. I am here this morning speaking out against and in opposition to House Bill 2253 titled “Abortion; prohibiting funding for abortion services; amending late-term abortion and woman's-right-to- know statutes.”

My name is JT Hammons. I am a 23 years old student at the University of Kansas. I am currently living in Lawrence, KS, and I have been a Kansan since age 4 and consider Kansas my native state.

Reproductive health care services, including abortion, are vital health care services for millions of Kansans. I personally feel that on occasion, the voices of mothers are silenced in this conversation. For instance, if it was not for safe and accessible abortion services available to my mother while stationed in Virginia, then there is a possibility that I would not be sitting in front of all of you today.

Back in the mid-1980s, my mother had just turned 21 years old when she had found out she was a couple of weeks pregnant. After conversations with my grandparents and she decided that the decision to end her pregnancy is what was best for her. I do not want to speculate—but I am her first born child and I was born five years after her decision to end her first pregnancy. And thankfully, that was the only time she has had to make such a difficult and scary decision. I want to emphasize that five years is a long time between that event and my birth, and that the possibility of time and places being drastically different as a result of having her first child at age 21—is also an almost certain possibility. With that drastic difference, an alternate reality results and in that reality I would not be sitting here today.

What if she had been notified, as HB 2253 section 9 lines 39 through 41 indicate, that a risk of breast cancer is associated with abortion? This claim is not supported by the National Cancer Institute<sup>1</sup>, the American Congress of Obstetricians and Gynecologists<sup>2</sup>, or the American Cancer Society<sup>3</sup>. So I am left wondering; would I be here today if she was notified of unsupported risk factors that led her to choose not to end her pregnancy? What if she lived in an area with no access to a full range of reproductive health care services? The proposed changes to tax provisions in sections 41, 50, 51, and especially 56, could cripple certain health care services financially—and as a result—they would have to close their doors. So again, I am left wondering—would I be here today if the clinic near her had closed down before she needed it?

Often I see some of my fellow Kansans thank their mother for choosing life. But I want to thank the U.S. Supreme Court for choosing choice, I want to thank my mother for choosing what is best for her—because it is possible that the alternate decision would have led to my inexistence, and I also want to plead with you all today, whom represent this great state I am proud to call my home for almost 20 years, to remember that there are two sides to every story. Thank you.

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<sup>1</sup> **NCI's Factsheet on Reproductive History and Breast Cancer Risk**  
<http://www.cancer.gov/cancertopics/factsheet/Risk/reproductive---history>

<sup>2</sup> **ACOG Committee Opinion Number 434, June 2009, reaffirmed 2011**  
<http://www.acog.org/Resources%20And%20Publications/Committee%20Opinions/Committee%20on%20Gynecologic%20Practice/Induced%20Abortion%20and%20Breast%20Cancer%20Risk.aspx>

<sup>3</sup> **ACS Learn About Cancer: Is Abortion Linked to Breast Cancer?**  
<http://www.cancer.org/cancer/breastcancer/moreinformation/is---abortion---linked---to---breast---cancer>