

**Testimony of Rachel Sweet
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Planned Parenthood Great Plains Votes
House Federal & State Affairs Committee
Opposing HCR 5003
January 15, 2021**

Planned Parenthood Great Plains Votes, the advocacy and political arm of Planned Parenthood in Kansas, opposes both HCR 5019 and SCR 1613, as these bills attempt to amend the state constitution to take away women’s reproductive rights.

In its 6-1 decision in *Hodes & Nauser, MDs, P.A. v. Schmidt*, the Kansas Supreme Court has found that “Section 1 of the Kansas Constitution Bill of Rights affords protection of the right of personal autonomy, which includes the ability to control one’s own body, to assert bodily integrity, and to exercise self-determination. This right allows a woman to make her own decisions regarding her body, health, family formation, and family life—decisions that can include whether to continue a pregnancy¹.” We believe that this right should be preserved and that the fundamental right to personal autonomy is too critical to be stripped from our state constitution.

Kansans deserve the right to make their own personal, private medical decisions without government interference. A constitutional amendment would allow increased government overreach into our private lives.

- Decisions about whether to end a pregnancy are deeply personal, and should be left to a woman in consultation with her health care provider, her family, and her faith—not politicians in Topeka.
- Throughout their pregnancy, a woman must be able to make her own decisions with the advice of the health care professional she trusts. This amendment could ultimately prevent many Kansans from making those important, personal decisions in consultation with their doctors.

A constitutional amendment on abortion takes away women’s constitutional rights.

- Women deserve equal protection under the Kansas Constitution.
- The Kansas Supreme Court conducted a comprehensive analysis of the history of the state constitution and the inclusion of natural rights. In painstaking detail, the court explained how the text includes the right to personal autonomy and how this right encompasses decisions about pregnancy. To extract one piece of this right to personal autonomy makes clear the motives behind those proposing this amendment—to discriminate against women and deprive them of their rights.

¹ *Hodes & Nauser, MDs, P.A. v. Schmidt* Case No. 114,153, (Kan. April 26, 2019), *slip op.* at 3

- The highest court in Kansas has interpreted the state constitution to protect a fundamental right of those who are pregnant. There is no justification for putting this right for women up for a vote.

Abortion is a safe, common medical procedure and should be regulated as such. No constitutional change is necessary to regulate the practice of abortion.

- Regardless of whether the Kansas Constitution has been found to protect abortion as an individual right, abortion can be regulated as a medical procedure, and health care providers who provide abortion can be regulated just like other licensed health care providers in the state. In other states where this right has been found in the state constitution, health care providers and facilities that provide abortion have continued to be regulated just like other health care providers and institutions.
- In its decision, the Kansas Supreme Court made clear that while the right to personal autonomy is fundamental, it is not absolute, and that the state will be able to regulate abortion using a strict scrutiny standard. “Accordingly, the State is prohibited from restricting this right unless it is doing so to further a compelling government interest and in a way that is narrowly tailored to that interest².”
- States have a compelling interest in ensuring that the practice of medicine in the state is safe and legal. Kansas can continue to ensure that the practice of medicine is well regulated to protect the safety of patients across the state, including the provision of abortion.
- Abortion is one of the safest procedures in the United States, with complication rates that are exceedingly low, and mortality rates that are lower than those for colonoscopies, plastic surgery, dental procedures, and adult tonsillectomies³—and much lower than that for childbirth. There is no medical reason for regulating health care practitioners who provide abortion differently from those that provide other services that are similar in risk and complexity.

This is the next step in a pattern of medically unnecessary restrictions that push abortion care out of reach for our most vulnerable citizens—with the ultimate goal of banning abortion outright.

- Kansas legislators have nearly two dozen medically unnecessary restrictions on abortion since 2011, creating a web of laws that push safe and affordable care out of reach, especially for poor women, young people, people of color, and Kansans who live in rural communities.
- Just last year, the legislature attempted to pass SB 67, which would have mandated that physicians inform their patients of an experimental protocol called medication abortion “reversal.” A recent clinical study of this protocol had to be stopped due to dangerous patient outcomes⁴.
- Women and their doctors, not politicians, know what’s best for women's health. We don’t need more dangerous political interference in our medical decisions.

This constitutional amendment would hamstring the courts from ever protecting abortion access in Kansas if *Roe v. Wade* falls.

- We have seen a rash of extreme abortion bans sweeping the country, all with one goal in mind—to bring a direct challenge to *Roe v. Wade* to the U.S. Supreme Court and make abortion inaccessible in this country. This is why it is more important than ever for Kansas to ensure that its citizens are protected from extreme politicians who want to ban all abortion.
- If *Roe* is overturned, an anti-abortion constitutional amendment like this one would bar Kansas courts from protecting the right to abortion for decades to come. With a U.S. Supreme Court that has turned

² *Hodes & Nauser, MDs, P.A. v. Schmidt* Case No. 114,153, (Kan. April 26, 2019), *slip op.* at 7

³ Nat’l Acad. of Scis. Eng’g & Med., *The Safety and Quality of Abortion Care in the United States* 74–75 (2018), <https://doi.org/10.17226/24950>.

⁴ Gordon, M. Safety Problems Lead To Early End For Study Of 'Abortion Pill Reversal'. (December 2019), <https://www.npr.org/sections/health-shots/2019/12/05/785262221/safety-problems-lead-to-early-end-for-study-of-abortion-pill-reversal>

against abortion rights, it is quite possible that we could lose federal protections for reproductive rights in the near future.

- We should value the rights provided by our constitution instead of changing it with a vaguely worded amendment that strips away our rights. We must fight to ensure our freedoms are protected, now and into the future.

The Kansas Supreme Court reached a thoughtful and well-reasoned conclusion in the *Hodes & Nauser* case that protects every Kansan's right to personal autonomy. It is vital that Kansas legislators realize that they will not be on the right side of history should they allow a vote that could strip rights from Kansas women. Particularly in light of the threats at the federal level, Kansas must not go backwards. We must retain our full state constitutional right to personal autonomy and ensure that people in our state can make their own personal medical decisions without government interference.

Nearly one in four women will have an abortion in her lifetime, and every woman's decision about her pregnancy—whether to have an abortion, choose adoption, or parent—should be respected and valued, as well as legally protected. We strongly encourage you to reject HCR 5019 and SCR 1613.

January 13, 2021
Dr. Iman Alsaden
Overland Park, Kansas

House Federal & State Affairs Committee
Topic: HCR 5003/SCR1602
Position: Opponent

As a board-certified obstetrician gynecologist providing the full spectrum of sexual and reproductive healthcare for Kansans for the last two years and as the Medical Director of Planned Parenthood Great Plains, I am appalled that the Kansas state legislature has continued to push this dangerous resolution pitted in politics, not science.

I have the honor of providing my patients with a wide range of essential healthcare services, including abortion care and contraception care. Especially during a pandemic, it is critical that Kansans are able to make decisions about their health and bodies in consultation with their values, their goals, their families, and their physicians. Politicians have no place in this decision.

We are collectively faced with some of the most challenging times in our nations' history. We are losing jobs at a record rate, losing access to healthcare coverage, facing food insecurity and high eviction rates, reckoning with police brutality and ongoing displays of violent white supremacy, and we are continually threatened by a pandemic inadequately by political leadership on both state and national levels. I ask Kansas legislators to pay attention to the resources deeply needed for Kansans to survive and thrive instead of meddling in the personal lives and decisions of individuals who know what's best for their lives.

If it's not my place to share with you how to do your job, allow me to share how I do mine. As a physician, I took an oath to do what's best for my patients. Sometimes that means providing them with prenatal care. Sometimes that means providing them with contraceptive counseling. Sometimes that means providing them compassionate abortion care. This is all care that centers my patients' autonomy, privacy, and dignity. I know that abortion is essential, safe health care that many Kansans will need. In fact, one in four women will access abortion over the course of her lifetime. How are we showing we value the worth of our community members if we are restricting basic health care that our family members, friends, and neighbors will need access to?

I devoted years and years of medical education and training to become the physician I am today. It is a privilege to use my knowledge and skills to share information with

Kansans about their healthcare options. Unfortunately, there is another force at play besides medicine and the needs of my patients. I currently have to navigate 22 medically unnecessary restrictions on abortion care in the state of Kansas. I can promise you after all of my training, these restrictions are not based in medicine; their sole purpose is to make abortion care impossible to access. There is no other health service I provide that is so onerously over-legislated. My patients and I should not be subjected to the barriers and shame created by abortion restrictions just because of the health care service being provided. We know that this constitutional amendment will only open the floodgates for more medically unnecessary, dangerous restrictions to care.

HCR 5003/SCR1602 is almost identical to last year's HCR 5019/SCR1613 which was determined to be unfit for the health and wellbeing of our community. We already decided removing access to health care is not in the benefit of Kansans; our state's Supreme Court explains that we protect the right to personal autonomy and decisions about pregnancy. No matter how we feel about abortion, we are not living the unique, individual lives of the patients I care for every day. We have no place to make their decisions and have no idea what challenges they may be facing, especially during an unprecedented time in history like that we are in today.

I urge you to vote no on HCR 5003/SCR1602 to support the full, complex, passionate lives of your constituents who I take care of every single day.