

Missouri H.B. 1430 and H.B. 1307 Would Hurt Women and Families

H.B. 1430 – Withholding Medical Care

H.B. 1430 specifies that anyone providing medical services cannot be required to perform or participate in activities that violate his or her conscience or principles. Pharmacists, physicians, and other medical clinicians have professional and ethical responsibilities to their patients. These bills specifically single out women's reproductive health care, including information and access to emergency contraception for rape survivors, for refusal of care.

Rights of refusal should never have the effect of limiting a patient's access to care or putting her health at risk. Dr. Anne Davis, consulting medical director at Physicians for Reproductive Health, cared for Margaret, a woman with a much-wanted pregnancy carrying twins. At 18 weeks, her water broke, five months prematurely. She had bleeding and an infection in her uterus. If untreated, serious infection, hemorrhage, and even shock would follow. There was no treatment that could save the twins, but it was an emergency situation for Margaret's health. Women like Margaret should not have their care denied or delayed under any circumstances.

Sadly, these situations are not unusual. There are documented examples of pharmacists refusing to fill prescriptions for contraceptives, physicians refusing to provide fertility care for gay couples, and delays in care for women in need of emergency abortion services. The American College of Obstetricians and Gynecologists, the leading organization in women's health, advises that if a health care professional cannot provide the standard of care, her or she must refer patients in a timely manner. But H.B. 1430 would abrogate that ethical and medical standard, putting Missouri women in harm's way and at risk of substandard care.

H.B. 1307 – Subjecting Women to Harmful Delays

Dr. Colleen McNicholas of St. Louis took care of Julie. Julie and her husband were told relatively early in her pregnancy that the much-desired baby they were carrying was affected with multiple abnormalities, the sum of which meant that their baby would not survive after birth. Sadly, Julie and her husband were given no assistance when they requested information on pregnancy termination (which could happen to even more families with the enactment of H.B. 1430, above). They were heartbroken, both by the diagnosis and what they perceived was a lack of compassion by their doctor. Alone, they attempted to navigate the complicated environment around pregnancy termination in Missouri. It took them three weeks to locate an abortion provider, only to be told that there would be additional delays. Under Missouri's restrictive laws, Julie was required to travel two hours to a facility on two separate occasions to comply with the state-required 24-hour delay. Because of the distance, she and her husband also had the burden of paying for a hotel room the night before her procedure. Julie was able to eventually find the care she needed, but her story of unnecessary delays and onerous requirements is not uncommon, especially in Missouri where access to abortion providers is so limited.

Dr. McNicholas also cared for Erica. Erica and her husband had looked forward with excitement to her 20-week ultrasound to find out the sex of their baby. It was a boy. But then they discovered that their son had Trisomy 13. Babies with this tragic condition often do not survive pregnancy and, if they do, live for only a few days after they are born.

Devastated, Erica and her family had only a few days to make an extremely difficult decision. They decided to have an abortion and not watch their baby suffer. After making their decision, they had to go to the clinic in advance of the procedure for a state-mandated counseling session. If they had been required to delay for three days, Erica may have not been able to have an abortion in Missouri. Erica writes:

Please consider my story in regards to this potential change in state law. The decision to terminate my pregnancy was not something that my husband and I took lightly, nor was it a decision that we wanted to make at all. Our son was very much loved; by us, and by our family. The time period prior to my procedure was the most difficult of my entire life. Please be mindful of cases such as mine when changing a law that will affect all pregnant women and their families, regardless of circumstance.

H.B. 1307 would increase an already punitive and unnecessary required 24-hour delay in care to three days, further harming women.

Conclusion

No woman should have to endure due state interference with her decision to end a pregnancy. But that is what already happens in Missouri. The legislature should not further obstruct the private decision-making of women and their families. Lawmakers should defeat these harmful bills.