

Testimony of Kim Anderson True, Freeport, in Support of LD 1619

Senator Carney, Representative Moonen and distinguished Judiciary Committee members:

My name is Kim Anderson True, from the Town of Freeport, and I offer this written testimony in support of LD 1619. By way of background, I am a retired attorney, mother of two and grandmother of two. I am a member of GRR! – Grandmothers for Reproductive Rights.

My support of this legislation stems from the fundamental principle that adults have the right to make autonomous decisions about their own bodies. For more than 100 years, the United States Supreme Court has interpreted the Constitution's textual protection for liberty to include the right to make personal decisions related to family, marriage, and childrearing, as well as the right to control one's body. Inherent in the right to bear a child is the concomitant right not to bear a child. Without choice surrounding the decision to carry a fetus to term, a woman is foreclosed from exercising control over her body and her life.

Most Americans want women to have access to safe, legal abortions. Reasonable people disagree about how far into a pregnancy abortion should be available, however. This disagreement is based on individual beliefs about such philosophical concepts as when life begins, when a fetus is entitled to legal protection, and when – or if-- the rights of a fetus ever become paramount to the rights of the pregnant woman. Often a person's position on abortion is rooted in religious tradition, yet few religions fail to recognize certain circumstances in which the moral, ethical, and compassionate decision is to terminate the pregnancy. Abortion is not immoral and should not be illegal. The decision to carry a fetus to term has such personal, unique, life-altering and long-lasting consequences, it is for the woman – not the government – to make it.

It is incumbent on the Maine Legislature to protect a woman's right to make autonomous decisions about her own body, including the most fundamental decisions around giving birth. Maine law, as it currently stands, prohibits women from terminating a pregnancy after viability unless it is necessary to preserve the woman's life or health. But preserving a woman's health is not the only reason a woman may need a third-trimester abortion. LD 1619 expands the circumstances under which a third-trimester abortion is legal, such as when a fetus is not capable of surviving past birth or when the continued growth of a fetus would compromise the life or health of another fetus sharing the womb.

Opponents of the bill argue that LD 1619 will lead to abortion on demand at any stage of fetal development. For the record, I believe that a woman should be able to independently make such a decision, given that the development and delivery of a fetus involves significant risk of harm to a woman, and the time, expense and emotional commitment in raising a child are enormous, life-lasting, and fall disproportionately on the woman who bears the child. But LD 1619 does not give women an unbridled right to terminate a pregnancy. The proposed statute specifically states that, after viability, an abortion may be performed only when it is necessary in the professional judgment of a licensed physician, and it restricts who can perform abortions. Licensed physicians performing third trimester abortions under LD 1619 continue to be bound by, and accountable for adhering to, their codes of medical ethics and professional standards; the physician risks sanctions and losing his or her license if a third-trimester abortion is not performed in accordance with applicable professional codes.

I urge the Judiciary Committee to support LD 1619 and affirm that personal reproductive health care decisions in the third trimester rest with a woman and her physician.

Thank you.