

## **Public Comment: LD 975**

### **Introduction:**

Good morning, Senator Carney, Representative Kuhn, and members of the Judiciary Committee.

My name is Gwen Walsh, and I am providing testimony in opposition to LD 975. I am a researcher in sexual and reproductive health psychology, and I have a masters degree in Clinical Psychology from Columbia University. I have also been a sexual and reproductive health educator and advocate for nearly a decade.

### **Comment:**

I am here today to express my deep concern for the negative public health implications of LD 975. States with abortion bans and restrictions have already demonstrated increases in maternal AND infant mortality rates.

One of the arguments for abortion is that we shouldn't end a life. The definition of "life" is usually either from a religious or scientific origin. The religious definition of life is contested: many Christians state that life begins at conception, while Jewish traditions state that life begins at first breath. Scientific consensus says that life begins at fetal viability, around 24 weeks.

If we maintain the Constitution's separation of church and state, we arrive at the abortion policy that currently exists in Maine.

Further restricting or criminalizing abortion is only criminalizing women for having sex. Any pregnancy is inherently dangerous to a person's health, and forcing someone to carry a pregnancy against their will is forcing them into potential physical, emotional, relational, and economic harm.

The alternative is for all heterosexual women to tell their male partners that they will never have sex with them, except for the few times they are actively trying for a child, and then never again until menopause. Is this a realistic solution? Is this what the heterosexual men who support this bill want? Of course not.

Trying to control peoples' sexual autonomy is not a desirable or realistic solution; it only punishes the people who can get pregnant, while demanding no responsibility from the other person who contributed 50% to the making of that pregnancy. How is this equal?

If we want fewer abortions, we should be investing in evidence-based solutions such as more comprehensive sex education, more effective and accessible contraception, and more access to sexual and reproductive healthcare. Restricting abortion, contraception, and sex education does

not promote public health; it only controls and punishes people, often those who are already marginalized.

As a public health researcher, educator, and advocate, I implore you to examine the existing evidence demonstrating increased infant and maternal mortality rates in states with abortion bans and restrictions. And ask yourself: in banning abortion, who are you punishing, and who are you enabling?

I'm happy to answer any questions.

Gwen Walsh  
94 Old Kents Hill Road  
Readfield, ME 04355