

**Prepared Testimony of
Katherine Bussard**

**Before the Michigan Senate
Committee on Health & Human Services
October 10, 2023**

Distinguished Chair and Members of the Committee: Thank you for the opportunity to provide testimony on the "Reproductive Health Act," including Senate Bills 474, 475, 476, and 477. My name is Katherine Bussard, Executive Director & C.O.O. of Salt & Light Global. Today, I am here to testify in my personal capacity. Out of an abundance of concern for women's health and commitment to protecting to "A Woman's Right to Know," I speak in strong opposition to the afore mentioned bills.

The Vital Importance of Protecting Women's Health

There is no state interest greater than the protection of human life, and every effort should be made to protect the life of women in all circumstances. The bills associated with the "Reproductive Health Act" propose to repeal several laws previously enacted by elected representatives of the people of Michigan to PROTECT women's health. One of good government's first duties is the protection of the life of its citizens; protecting them from violence and fraud are also important duties of government. The state's interest is compelling and this state ought to use its power to protect its people. Even Proposal 3, Article 1, Sec 28 (4) acknowledges the state's compelling interest "for the limited purpose of protecting the health of an individual seeking care, consistent with accepted clinical standards of practice and evidence-based medicine." Removing the licensing and reporting requirements as proposed in SB 474 is counterintuitive to this end, is *not* required by the language of Prop. 3, and poses direct increased risks to women seeking abortion.

On page 29, SB 474 removes abortion clinic licensing and reporting requirements by repealing Freestanding Outpatient Surgical Facilities licensing standards and the promulgation of related rules by the health department, which removes vital protections for most abortion-seekers. This is significant because in 2022, nearly 26,000 abortions in Michigan were performed in Freestanding Outpatient Surgical Facilities (Michigan Vital Records). 2,021 of these procedures were surgically invasive Dilation and Evacuation procedures, representing 94.4% of these procedures performed across the state (ibid). The attached chart demonstrates these numbers and shows just how important Freestanding Outpatient Surgical Facilities are to access and health safety of women seeking abortion.

There was some debate during the initial hearing in the house on these bills as to whether these procedures constitute "surgical abortion," a term which SB 474 also redacts. According to MI Department of Licensing and Regulatory Affairs, they do:

"R 325.45109 Definitions; S to Z.

(b) **"Surgery"** means the treatment of human beings by a physician in an operating room, procedure room, examination room, or other setting to safely perform 1 or more of the following procedures:

(iv) Instrumentation of the uterine cavity, including the procedure commonly known as dilatation and curettage, for diagnostic or therapeutic purposes.

(v) Any instrumentation of or injection of any substance into the uterine cavity of a woman for terminating a pregnancy."

It is prudent, then, to examine the health and safety standards rescinded by SB 474. If this bill is passed in its current form, women will be denied the following licensing protections under LARA's FOSF

Regulations:

- The protection of having a "qualified anesthesiologist or anesthesiologist" present to "select the most appropriate anesthetic agent to be used and to supervise or administer the anesthetic. (R 325.45331) – *Because anesthesia carries high risks if not administered properly, repealing this standard endangers the lives of women.*
- The protection of knowing that "Surgical procedures must be performed by licensed and credentialed health professionals" and that "physician or registered professional nurse is onsite." (R 325.45333) *Women deserve real doctors and nurses treating them. Removing this protection exposes women to dangerous people who would prioritize profits over patient health.*
- The protection of "Surgical hand-scrub hygiene procedures" (R 325.45335). *Women seeking abortion deserve to be treated in sanitary environments without exposure to unnecessary germs.*
- The protection of being treated with only "Surgical equipment, instruments, and supplies must be maintained in sufficient quantities, stored in a sanitary environment, and maintained in accordance with the applicable manufacturer guidelines and nationally recognized infection prevention and control guidelines published by" organizations including the CDC. (R 325.45337) *Women seeking abortion deserve to be treated in sanitary environments where necessary equipment is present and where basic sanitation standards are observed.*
- The protection of being treated in a facility prepared to address the overall wellbeing of the patient as it concerns reproductive health, including a facility prepared to "make available and offer non-directive, non-coercive counseling and referral for subsequent indicated care." (R 325.45341) *Many women seeking abortion may struggle with mental health, especially those who have been victims of rape or sexual assault. Having counseling services available may save the life of the mother and can certainly improve her long-term outcome.*
- The protection of a safe building where first responders can respond in case of emergency and where emergency preparedness standards are met, from published floor plans, to fire extinguishers, to first aid. (Part 3, Subsections C & D) *Women deserve to be treated in safe spaces, where emergency help is available in situations where seconds can determine the difference between life and death.*

ALL these BASIC safety requirements will be REPEALED if SB 474 is passed in its current form. This body must not confuse unfettered "access" with unfettered "risk." Women seeking reproductive care deserve safe and clean facilities and listened professional care. Government has a duty to protect the life of its citizens, and these life-saving regulations should be left in place. Repealing these commonsense safety measures put women needlessly at risk while opening the door to sub-standard care without consequence.

Regarding SB 475 & 476, informed consent is vital and more important than ever, but the proposed legislation repeals the basic protection of a woman's right to know what is about to be done to her body. Additionally, the mandatory reporting repealed by SB 475 and 476 further decrease the ability of women to make fact-based decisions with healthcare providers about what procedures and treatment plans best fit their unique medical situation. Without reporting, data for women to understand risks or even select the best clinic or best doctor simply will not be available. This is a no-win situation for women. Why would the legislature suggest that women are not capable of looking at facts and making informed decisions? Why would legislature not want to publish reports that could help women select the best service providers? Again, let me remind you of your duty to protect the life of your citizens.

Other Concerns with the RHA

SB 477—revises the “Pregnant and Parenting Student Act” to allow on-campus parenting services to provide abortion referrals *instead* of parental resources. This provides the opposite of what parenting clients are looking for. For a pregnant student seeking support to complete her education while becoming a mother, this type of pressure to abort can make her feel coerced, like she has only one choice. The legislature should take steps to empower female students who want to be mothers with real tools for success, rather than trying to guide their decision in the opposite direction.

The afore mentioned bills also repeal the “born alive” protections for children who survive abortions. The duty of the state is just as applicable to these children, without regard to the desire of the mother, to ensure that they reserve equal protection under the law (14th Amendment, US Constitution).

While thoughts may differ on when life begins, once a person is born, they are clearly entitled to EQUAL government protection under the law. To do less to save the life of a person because of their age, desirability, or gender is barbaric discrimination of the worst kind. Newborn citizens and pregnant women are all created in the image of God (Genesis 1:27). Their life has inherent worth and dignity, and they deserve the best medical and humanitarian care we can provide—without exception.

Conclusion

The “Reproductive Health Act” needlessly and recklessly endangers women by denying them standardized medical care. It prioritizes the profits of groups like Planned Parenthood over the protection of women. It devalues the dignity of human life. It disregards the conscience and expressed will of Michiganders. It creates policies devoid of compassion. The “Reproductive Health Act” is bad public policy and I urge you to join me in opposing this dangerous and destructive legislation.