



# PATRICK TESTIN

## STATE SENATOR

**DATE:** May 7, 2019  
**RE:** **Testimony on Senate Bill 173**  
**TO:** The Senate Committee on Health and Human Services  
**FROM:** Senator Patrick Testin

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Thank you members of the Senate Committee on Health and Human Services for accepting my testimony on Senate Bill 173.

This legislation, which I have authored with Representative Dittrich, is an important step for the State of Wisconsin. In many areas of the world, there are observable instances of selective abortions occurring due to the characteristics of the unborn child.

Iceland has been pointed to as one of the most prominent examples of these practices in action. According to an article published by CBS, almost one hundred percent of women who undergo prenatal screening tests and receive a positive test result for Down syndrome make the decision to end their pregnancy. Many other countries also have data confirming high abortion rates following a diagnosis of Down syndrome. This includes the United States, which had a rate of 67% as of 2011.

There are many instances of sex-selective abortions occurring around the world as well. The United Nations Population Fund cites studies that indicate that in 2010, 126 million women were absent from the world due to discriminatory sex-selective abortion. It is projected that due to this practice, many more – more than 142 million – will be missing from the world by the year 2020.

Senate Bill 173 seeks to add into statute that the State of Wisconsin will not allow abortions solely for the purpose of eliminating an unborn child due to the characteristics that they have developed – whether it be their sex, race, national origin, ancestry or a diagnosis or potential diagnosis of Down syndrome or other congenital disability. The bill will require physicians to make this known to the woman on which an abortion is to be performed in addition to the other informational requirements currently in law.

Senate Bill 173 also includes provisions that specify the procedure for bringing forward claims for civil damages for violations of the terms of this bill. Claims may be filed by the mother, father or the parent/guardian of a woman if the woman was a minor at the time or dies as a result of the abortion. Additionally, should a physician perform an abortion for any of the prohibited

reasons included in the bill, that physician must be investigated for unprofessional conduct by the Medical Examining Board.

Though enforcement may not be easy, it is important that our state be proactive rather than reactive and make it clear in statute that this kind of prejudice will not be tolerated. Deciding that a life is unwanted or unfit to live because of their attributes is inhumane and is a practice that should be declared unlawful in Wisconsin.

Thank you for taking the time to listen to my testimony today, and I respectfully ask that you join me in supporting Senate Bill 173.



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# BARBARA DITTRICH

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STATE REPRESENTATIVE • 38<sup>th</sup> ASSEMBLY DISTRICT

May 7, 2019

## Senate Committee on Health and Human Services

**RE: Rep. Dittrich Testimony on SB 173 – Sex-selective, disability-selective, and other selective abortions and providing a penalty**

Good Morning Senate Committee Chairman Kooyenga and members of the committee. I appreciate the opportunity to speak to you today on this incredibly important topic, protecting the lives of our unborn children regardless of their diagnosis, ability level, race, color, nationality, or gender.

Today, I would like to speak to the importance of saving the lives of our unborn children.

SB 173 prohibits a person from performing/attempting to perform or inducing an abortion if the person knows the woman is seeking an abortion solely because of the race, color, national origin, ancestry, gender, or diagnosis or potential diagnosis of a congenital disability.

In my myriad personal experiences, I have witnessed many beautiful, unique individuals that would have been otherwise “written off” by society flourish and live full and meaningful lives as members of our society. While I appreciate the angst and fear of a woman seeking an abortion, I want to discourage the elimination of an unborn child due to a diagnosis or potential diagnosis. Rather, I believe we should encourage and support women, even helping them to make the difficult decision to place a child for adoption if they feel unable to parent the child. I speak to countless families that would welcome and have welcomed a child into their lives regardless of that child’s ability level, through biological birth or the miracle of adoption. Additionally, a child should not be killed due to their race, color, national origin, ancestry, or gender as it is equivalent to discrimination in the womb. If we wouldn’t discriminate after birth, we surely should not prior to birth. Every human being should expect the protection of life as stated in our Constitution.

Deciding which life is worthy of saving even up to birth, while seeming to avoid the challenges of living with difficulties, unwittingly practices eugenics, something humanity has decried throughout history. Further, it deprives us of the rich diversity people of every type add to our world. We cannot both say that we support individuals of every race, gender, nationality, ethnicity, and ability level yet use the same criteria to kill an unborn child.

SB 173 would not interfere with the existing law prohibiting any person from performing an abortion if the probably post-fertilization age of the unborn child is 20 or more weeks.

In an era where we have availed ourselves of incredible technology like 3D ultrasounds and sonograms to see the faces of our unborn children, humanity has evolved enough to understand that the elimination of these unborn children is simply inhumane. I ask for your support in this legislation and welcome your questions.

Wendy Heyn  
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May 6, 2019

In Support of AB 182



Dear Wisconsin Assembly  
Representatives,

This is my son, Liam, and his 2 sisters. He is 11 years old and is non-verbal and has total care needs as the result of Mecp2 Duplication syndrome. When Liam was born in 2007 we thought we were bringing home a healthy baby, but he failed to meet milestones during his first year and had some medical issues. At 14 months old, he was diagnosed with Mecp2 Duplication syndrome and, despite having no family history of this, I was diagnosed as a carrier.

In the bleak days after Liam's diagnosis, I wanted to escape from this scary new reality. Liam was a big 14 month old baby, so my mind went to things like running away. I can imagine that such a diagnosis in utero might lead a loving mom who values life to consider abortion. Upon diagnosis, the unknown of a life of disability feels scary and hopeless. I worry that moms might feel abortion is a "simple" answer to this.

Liam is a precious boy with a funny, sweet personality. He has a community of people who love him and who appreciate his presence in their lives. In Liam's 11 years, he has touched SO many people and been such a blessing. Liam's life is brimming with purpose.

When my husband and I got married, we wanted a big family. We learned that with this syndrome, any sons that we have would have a 50% chance of having it. (Our girls would have a 50% of being asymptomatic carriers – like me). As we dealt with the whirlwind of therapies and medical issues for Liam during the first years, we also tried to give our older daughter a normal life. It was exhausting and we knew that parenting more than one medically complex child would be beyond what we could handle.

I was at that early stage of baby and toddler life when all of the families that we knew were having healthy babies...one after another. I couldn't hear about a family or friend becoming

pregnant without feeling sick in the pit of my stomach. I wasn't just facing a life full of wheelchairs, adaptive equipment, IEPs, communication devices, and broken hopes for my son. I was also facing the dashed dreams of future children. It was bitter and so painful. My hopes for more children burned deeply. They felt desperate and intense.

I went to my trusted ob/gyn- the same man who had delivered my two children and countless other- and told him our situation. I asked him for advice about permanent birth control since I was the carrier of this. I told him that we believe that life begins at conception and that God has a purpose for every life. At that time, we were considering adoption or embryo adoption as means to grow our family. This man who has delivered so many lives told me that I was overlooking a great option. He encouraged me to "Get pregnant the usual way and have a test at 9 weeks. If the embryo carries the duplication, you can have a genetic D&C right here at the hospital. All of the area hospitals do them except Wheaton Franciscan and it is a simple procedure. You can have it done on a Friday and be playing volleyball by Sunday. Your insurance will pay for a genetic D&C as many times as you need one." The doctor didn't encourage me to consider this once, but THREE TIMES. Every time he did, I explained to him that I am a mom who is raising a child with this syndrome. His life has value. Any child conceived would have that same value. I could not consider such a procedure that would end the life of my child. But oh, my heart. My heart was aching.

The longing of my heart was so strong for more children...children who would grow in my own womb. As this trusted doctor encourage me repeatedly to seek a "genetic D&C" I asked myself if this would really be such a bad thing to consider. It would certainly be cheaper and full of fewer road blocks than any sort of adoption. I went home and I cried to my husband "WHY do we believe this? Even the doctor says we should have another baby and that it isn't abortion, only a 'genetic D&C' " I am so thankful that in my weakest moments when even my doctor gave me bad advice, my husband did not. He talked to me about the value of life and of every child. I had been well versed on life issues and my heart knew the real truth, so that when my husband spoke it, I recognized it as truth. I am so thankful for that.

I support this bill because it will force medical professionals to value the life of every baby, despite diagnosis. It will prevent mothers from making mistakes in their weakest moments and having to live with regrets that can never be silenced. Please pass this and make Wisconsin a safe place for every baby.

Wendy Heyn



**WISCONSIN CATHOLIC CONFERENCE**  
**TESTIMONY ON SENATE BILL 173**  
**PROHIBITION ON SELECTIVE ABORTIONS**  
**Presented to the Senate Committee on Health and Human Services**  
**By Barbara Sella, Associate Director**  
**May 7, 2019**

The Wisconsin Catholic Conference (WCC), the public policy voice of the Catholic bishops of Wisconsin, urges you to support Senate Bill 173, which would ban selective abortions. The Catholic Church has always held that induced abortion is both immoral and cruel, because it treats some human lives as completely disposable. This bill seeks to inform women and the public about the value of all human life.

Senate Bill 173 prohibits abortions solely because of race, color, national origin, ancestry, sex, or disability. In 2012, the Guttmacher Policy Review issued a paper on sex-selective abortions, which recognized the widespread use of such abortions in Asian countries.<sup>1</sup> The paper concluded that the real way to stop sex-selection abortions is not to prohibit such abortions, but to address the underlying conditions that can lead to them, namely an end to poverty and violence, and an increase in access to health care and education for women.

We agree that there is much work to be done on these underlying issues. The Catholic Church runs charities, hospitals, schools, and prison ministries precisely to assist the most vulnerable. Here in Wisconsin, the bishops have long supported efforts to expand educational opportunities, increase access to health care, improve wages and employment, increase housing, reform criminal justice, and welcome immigrants.

But serving the needs of the poor – as vital as it is – is not enough to halt the spread of selective abortions or abortion in general. For that to happen, a cultural shift must take place and the law can play an important part in that shift. The law signals what is and is not acceptable behavior. Choosing to abort based on sex, race, or disability is simply wrong.

True freedom is not absolute choice – a choice without limits. True freedom involves living in such a way that one does not deny freedom to others. SB 173 forces us to confront once again the question of what truly furthers respect for women: absolute freedom that would deny the right to life to a girl because she is not a boy, or an affirmation that her life is worthy of respect both inside and outside the womb.

This bill defends children, educates women and the public, and makes certain the State of Wisconsin does not support elective abortion. We urge you to support its passage.

Thank you for the opportunity to testify today.

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<sup>1</sup> <https://www.guttmacher.org/gpr/2012/05/problem-and-solution-mismatch-son-preference-and-sex-selective-abortion-bans>



Wisconsin Alliance for  
**Women's Health**

www.supportwomenshealth.org

TO: Senate Committee on Health and Human Services  
FROM: Sara Finger, Executive Director, Wisconsin Alliance for Women's Health  
RE: Testimony in Opposition of SB 173  
DATE: May 7, 2019

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Chairman Testin and members of the Senate Committee on Health and Human Services, thank you for the opportunity to provide written testimony in opposition of SB 173.

Our vision at the Wisconsin Alliance for Women's Health (WAWH) is that every Wisconsin woman - at every age and every stage of life - is able to reach her optimal health, safety and economic security. In the spirit of our vision, we oppose all legislation that seeks to advance an anti-abortion agenda under the guise of protecting women's health and anti-discrimination legislation.

If reducing the number of abortions in Wisconsin is truly the goal of the individuals and organizations supporting these bills, WAWH would humbly suggest that they cease their focus on implementing every fathomable obstacle to accessing abortion care and begin to prioritize public policies that have demonstrated success in preventing unintended pregnancies and reducing abortion rates. Study after study indicates that increasing women's access to contraception and family planning services significantly reduces the occurrence of unintended pregnancies and abortion rates. Despite this overwhelming evidence, for the past eight years this Legislature has virtually ignored proactive public policies that would increase women's access to family planning services and has worked to undermine and degrade the existing family planning services infrastructure in Wisconsin.

Just as importantly, for elected leaders who claim to value the health of mothers and babies in Wisconsin, we encourage their support of positive, proactive policies that will improve maternal and child health outcomes in our state. For too long, Wisconsin has ranked #1 in the nation around infant mortality of black babies. We need to look to the strong evidence that supports Medicaid expansion as a way to reduce the African American infant mortality rate and fully expand BadgerCare.

We also need to fully invest in and advance the "Healthy Women Healthy Babies Initiative" that includes additional evidence-based programs like home visiting, community based doulas, and a new Infant Mortality Prevention Program. Without Medicaid expansion in the budget, our state will lose funds Wisconsin needs to invest in healthier pregnancies and births to address our state's infant mortality and black healthcare disparities.

It is important to note that the communities this bill directly affects have not asked for this bills to be crafted or advanced. On the contrary, these advocacy groups are actively engaged in the budget process and are focused on lifting up proposals in Governor Evers' budget around transportation, education, social supports and healthcare access.

As an organization devoted to promoting comprehensive women's health in Wisconsin, we ask this committee to stop playing political games with women's reproductive health. Women in Wisconsin do not need politicians inserting themselves in their doctor's office and further restricting access. Please vote no on SB 173.





# Wisconsin Religious Coalition *for* Reproductive Choice

May 7, 2019

Senate Health and Human Services Committee Hearing on SB 173

Rabbi Bonnie Margulis

Chair, Wisconsin Religious Coalition for Reproductive Choice

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## **WISCONSIN RELIGIOUS COALITION FOR REPRODUCTIVE CHOICE OPPOSES DANGEROUS ANTI-CHOICE LEGISLATION**

The Wisconsin Religious Coalition for Reproductive Choice is proud to engage in the sacred work of protecting reproductive health care for the women and families of Wisconsin. We firmly oppose any efforts to interfere with a woman's right to exercise her right to this care. SB 173 is designed to do exactly that. This bill is dangerous to women's health, and only serves as a distraction from the important question of expanding access to health care in Governor Evers' budget.

Wisconsin RCRC includes Jews, Unitarians, Presbyterians, Methodists, United Church of Christ, Episcopalians, among others. All of our faith traditions teach that women are made in the image of God, endowed with the basic human rights to control their own bodies and to determine whether and when to become a parent. In order to exercise these rights, women must have access to abortion services, without interference from legislators who have no health care background or expertise.

At the same time these bills, which would curtail access to needed health care, are being introduced, the Joint Finance Committee has announced it will not include expansion of BadgerCare in its budget deliberations. Expansion of BadgerCare would result in greater access to health care for all low-income Wisconsin residents.

Evers' 2019-21 budget proposal includes \$1.6 billion in federal funding to expand Badger Care to cover childless adults, parents, and caretakers with incomes up to 138% of the federal poverty level. This expansion will enable an estimated 82,000 additional individuals to access affordable healthcare.

Expanding Badger Care will bring in new federal funds and save Wisconsin taxpayers \$324.5 million. The budget proposes to reinvest these savings into new initiatives to improve healthcare access and quality for all residents, not just those enrolled in Medicaid.

However, the Republican leadership has just announced they will take BadgerCare expansion out of the budget. This move will take away funding for vital health care services, including mental health care, dental care, services for the disabled and the elderly.

As people of faith, we believe access to health care is a human right. We oppose these anti-choice bills and urge the legislature to vote no on each one. We further urge the legislature to preserve expansion of BadgerCare in the budget, and to stop distracting the legislature and the electorate with dangerous, anti-choice legislation. Let's not let politics play games with health care for the most vulnerable among us!

To Whom It may concern,

Why any legislator who professes that his/her primary political agenda is to champion the public's best interests would support the currently proposed abortion restrictions in assembly bills 179, 180, 182 & 183 should strain the credulity of even the most gullible voter. In my professional opinion as a provider of reproductive health care for almost 50 years, these blatantly politically motivated attempts to impede securing and providing desired health care services are neither good public policy nor good medicine. Trust the patients and their doctors to make their own medical decisions free of the legal coercion proposed in these bills.

Very sincerely,

Dennis Christensen, MD, FACOG