

SECOND REGULAR SESSION

HOUSE CONCURRENT RESOLUTION NO. 63

101ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE WEBER.

5048H.011

DANA RADEMAN MILLER, Chief Clerk

1 **WHEREAS**, Missouri is committed to a quality health care system that meets the
2 needs of all of its citizens, and affordable abortion care is an essential component of this
3 health care system. Since about three in ten women will have an abortion in their lifetime, it
4 is one of the most common medical procedures in the United States; and

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6 **WHEREAS**, abortion is one of the safest medical procedures in the United States.
7 Aspiration abortion, for example, causes no complications in 99 percent of cases, and
8 medication abortion causes no complications in more than 99.9 percent of cases, making it
9 safer than Tylenol, aspirin, and Viagra; and

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11 **WHEREAS**, abortion has become less accessible. The number of abortion clinics has
12 declined by about 40 percent over the past three decades. Today, almost 90 percent of
13 counties in the United States do not have an abortion provider and 38 percent of women of
14 reproductive age live in those counties. Four states have only one provider and at least ten
15 states have three or fewer providers; and

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17 **WHEREAS**, abortion is an essential component of health care because it provides all
18 women the ability to plan and space their pregnancies, which clearly improves women's
19 physical, psychological, and economic well-being; and

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21 **WHEREAS**, abortion is an essential component of health care for women with lower
22 incomes. A five-year examination of the effects of unintended pregnancy on women's lives
23 by ANSIRH (Advancing New Standards in Reproductive Health) found that the main reason
24 women terminate their pregnancies is because they can't afford to have a child; and

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26 **WHEREAS**, abortion is an essential component of health care for women who face
27 medical problems. For example, a woman who is diagnosed with cancer in the middle of

28 pregnancy and must make a choice between obtaining an abortion or foregoing lifesaving
29 chemotherapy; and

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31 **WHEREAS**, abortion is an essential component of health care for young teenagers
32 who become pregnant. For example, a girl who must make a choice between obtaining an
33 abortion or running the risk of enduring severe, lasting damage to her physical health; and

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35 **WHEREAS**, abortion is an essential component of health care for women who
36 experience major problems in pregnancy. For example, a woman who finds out that her fetus
37 would live only for a few hours past birth and carrying that pregnancy to term might severely
38 damage her ability to bear other children in the future; and

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40 **WHEREAS**, the practice of abortion care, like all health care, should be driven by
41 evidence-based standards developed and supported by medical professionals. But instead,
42 patients and providers are required to overcome numerous barriers erected by abortion
43 opponents. These barriers such as waiting periods, so-called "counseling" requirements, bans
44 on insurance coverage, limits on who can perform abortions, and TRAP laws are not intended
45 to protect a woman's safety. They are designed to coerce women into giving birth to
46 unwanted children. They serve no purpose other than to make abortion more difficult and
47 expensive; and

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49 **WHEREAS**, when abortion opponents argue for onerous regulations and procedures,
50 they are treating abortion care as if it is a separate issue apart from health care. But abortion
51 is, in fact, health care:

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53 **NOW THEREFORE BE IT RESOLVED** that the members of the House of
54 Representatives of the One Hundred First General Assembly, Second Regular Session, the
55 Senate concurring therein, hereby resolve that Missouri is committed to ensuring that:

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57 (1) Abortion shall be recognized as an essential component of women's health care;

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59 (2) Abortion care shall be made affordable and accessible throughout the state and
60 integrated into the health care safety net;

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62 (3) Facilities providing abortion care or health care professionals providing abortion
63 care shall not be subjected to regulations more burdensome than those imposed on facilities or
64 health care professionals that provide medically comparable procedures;

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66 (4) All qualified health care professionals shall be able to provide abortion care; and

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68 (5) Health care professionals providing abortion care shall be able to follow best

69 medical practices developed and supported by scientific evidence.

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