

Testimony submitted via email.

Chair Greenlick and members of the Health Care Committee,

Thank you for this opportunity to share my story. My name is Hanna Neuschwander and I live in SE Portland; I am a constituent of bill cosponsor Rob Nosse.

I am writing in strong support of this bill, which—if it passes—will make Oregon the most equitable state in the nation to be a woman, regardless of income, race, or citizenship status.

I'd like to share my story with you. On September 26 last year, my husband John and I arrived at Sunnyside Hospital in Clackamas Oregon to give birth to our daughter, River. She was born at 3:42 pm, and I held her and sang to her and memorized her body for two incredible hours in this blanket, which my mother knit for her. My doctor held my hand as she died two hours later. She kissed me on the forehead and told me I was strong. The nurse who took her from me and wrapped her up in this blanket so lovingly that it still makes me cry to think about it.

We knew my daughter was going to die because I was having a late-term abortion. I had a late-term abortion because we found out at our 20-week scan that River was missing a number of key structures in her brain. My doctors at Kaiser were amazing. My care was caring—everyone treated us with deep kindness and compassion. My care was continuous – all under one roof, everyone knew my story. I am in a support group of women around the country who have experience similar events. Many of them, because of 20-week bans or lack of providers, were forced to get on airplanes, fly to different states, stay in hotels, face abortion protestors outside the clinic, and pay out of pocket up to \$25,000 for the privileged of having to go home without their wanted babies. (So THANK YOU for being a better state than that.)

The picture I paint of my daughter's birth is not the picture that abortion opponents paint about abortion “mills” and selfish or lazy mothers. Contrary to their rhetoric, the decision to let River go was the most loving, most moral decision I've ever made. And the systems of care I found myself in treated me with **dignity and respect**. This is exactly as it should be.

Unfortunately, it's not this way for everyone. Two weeks after I returned to my home—two weeks I spent cradling this an blanket and crying my heart out—I received a bill in the mail for \$2,123 dollars. **That's more than a month's salary for someone making minimum wage in this state.** I could afford to pay this bill; many (many, many) women in Oregon could not.

And that's just \$2,000. If River had lived but I hadn't had the amazing prenatal care that helped us find out about her condition, if I hadn't been able to scrape together \$2,000, if she had been born—her care would have cost us hundreds of thousands of dollars; it would have put me out of work; it would have put us on Medicaid. That's the math we had to do: \$2,000 vs. hundreds of thousands. \$2,000 wasn't a big deal for us. But for MANY women in this state it's the difference between food and rent. How can we ask a woman to choose between the moral, loving decision lodged in her heart and her ability to pay rent and feed herself and her children? These are the tormented knots we tie women into when

abortion is technically legal but functionally inaccessible—as they are for thousands of poor women in our state.

Every woman in Oregon deserves what I had. This bill will make Oregon a beacon of hope and dignity. It allows Oregon women to realize their potential as full members of our society, it allows them to be equal citizens. Our ability to be fully each of these things—fully women, fully citizens, fully participants in our society—depends on this bill passing. It sounds grandiose, but life and death and motherhood are grandiose, and that is what we're talking about here.

This bill is more necessary now than ever. The national Republican "repeal and replace" plan explicitly forbids health tax credits from being used to pay for any insurance plan that covers abortion. That, effectively, will gut abortion coverage in America and in Oregon, where more than 150,000 people are currently enrolled in an ACA exchange plan. We know from decades of study that it is poor women who are disproportionately affected by lack of access to abortion. There is no equity without access.

This bill remedies the most important barriers to family planning and reproductive health services so that they are truly, equitably available to all Oregonians.

Respectfully,

Hanna Neuschwander