RE: Senate Bill 1 (SB-1)

After 4 years of trying to get pregnant, extensively exploring adoption, 2 rounds of in vitro (IVF), 2 rounds of frozen embryo transfers, and a miscarriage, my husband finally got there in July of 2016. We were utterly thrilled. The pregnancy was going great until our daughter Grace Pearl's anatomy ultrasound to evaluate all of her organs, which happens between 18 and 22 weeks. Our excitement over seeing pictures of our beloved daughter slowly turned to uncertainty, panic and then despair. Her kidneys were huge and full of cysts. There was no amniotic fluid around her body. Without this fluid, her lungs would never develop. When our doctor told us that her condition, Multicystic Dysplastic Kidney Disease, was 100% fatal at such an early onset, and having affected both kidneys, we sobbed and sobbed. Grace's diagnosis was confirmed independently by, at the time, three specialists, and we would have done anything to change the outcome.

We had no great option. We could wait and hope for a miracle, knowing she'd either be born into immense pain without functioning lungs, or she'd be stillborn. In addition we had to balance the reality that continuing a pregnancy that had no chance of survival would only increase the risk to my health. In the meantime, Grace's nervous system would be developing more and more. She would enter into the third trimester of pregnancy with the possibility that she'd experience more pain the longer I was pregnant with her, without amniotic fluid to provide cushion and comfort. Her organs would likely be crushed by my body. We were informed by all of our doctors that the latest research supports that fetuses do not likely feel pain until the third trimester (28 weeks), when the connections in their brain are more developed. My husband and I together decided our best and most compassionate option was to terminate the pregnancy to save Grace that pain.

Please know that our decision to terminate the pregnancy was one that we made out of immense love, and was terribly difficult. We wanted Grace to experience no pain or suffering, and this was the least painful thing we could do for her. They cut her umbilical cord prior to the termination to ensure her heart would stop beating and she'd have as peaceful of an experience as possible.

It's important to note that not one of our now ten specialists advised us to consult Robert Onder, who has treated me for environmental allergies in the past, for his input on my health, Grace's health, how the pregnancy should be handled, or any part of our subsequent search for answers should we be able to pursue pregnancy again. His opinion is not pertinent to my reproductive health, Grace's diagnosis, or how we handled our gut-wrenching decision to terminate the pregnancy to spare her pain. In fact, his opinion is not just irrelevant, but furthermore dangerous and unethical as his political beliefs prompt him to interject falsehoods into the space of women's reproductive health using his medical degree as his validity. Onder's statements and opinions around women's reproductive health are not science- or fact-based, to an extent that it makes me question his ability to advise on my allergies safely or effectively.

I shouldn't have the leave the state to take care of myself and my family. I have lived in Missouri for all of my 37 years. I got my Bachelors and Masters degrees here. I love this state, and am proud to pay taxes and vote in every single election I can here. My family and I deserve to have the state laws include us and those like us, and to have reasonable access to facilities and options around my reproductive health that are not bound by time and geographical limits.

What if I was a single parent and couldn't find child care for my other children in time? What if I couldn't save up the thousands of dollars required for the termination in time? What if I lived in a rural area and couldn't access the many specialists we saw in time to terminate and save our daughter eventual agonizing pain? I shouldn't have to rely on privilege to obtain necessary and humane medical care. Anomalies like Grace's can happen at any point in a pregnancy, and it's wrong to put a time or geographical limit on our options for addressing these anomalies. People will continue to learn such devastating news about their pregnancies in counties all around Missouri, and not just before 21 weeks, 6 days. That is a fact.

We need thoughtful, inclusive, intelligent laws, not ones that can so blatantly and easily harm all women, including the unborn they purport to protect. If I had lived in a Joplin for instance and couldn't have gotten to the necessary medical care in time (we terminated one day before we legally couldn't as it was), Grace 100% would have suffered.

I beg you to know the full impact of wanting abortion made more difficult for people to obtain/less safe of a procedure.. I have grappled with the hell of choosing to end my wanted child's life every single day, and if you think you wouldn't make the same decision we did, please be grateful you very likely haven't had to. Know that we are the people you're hurting, Grace is the baby you'd be hurting. We aren't some hypothetical people who no longer want to be pregnant because it's inconvenient. We are people that have chased this dream harder than anything else in our lives, and were put in a terrible position and thankfully, had the right to do what was best for our very, very loved baby girl. Please don't make it even harder for people like us in the future, and reject this legislation.