Good afternoon. I am Susan Demchak, from Rock Hill. My senators are Climer and Fanning. I am a board certified in OB/GYN, a fellow of the American College of OB/GYN and have been in practice for 20 years. I oppose H. 3020. I cancelled half of an operating room day to be with you.

I bring you good news that the national abortion rates are as low as they have been since Roe. The rate declined 26 percent between 2006 and 2015, hitting the lowest level that the government has on record. This is not because of restrictive abortion laws. I know this because, as the abortion rate has gone down, the birth rate has not gone up. The decline can be attributed to sex education and availability and affordability of reliable contraception.

If you are truly interested in decreasing rates of abortion, you will champion sex education and contraception. When contraception is not available, women use abortion as contraception, even when it is not legally sanctioned and puts them at grave physical risk. Women die of hemorrhage, infection and internal organ injury as a complication of unsafe abortion in countries where abortion is not available. Prior to 1973, it is estimated that 1.2 million women resorted to illegal abortions each year and as many as 5000 of them died of complications. A 1967 study showed that illegal abortion was the number one cause of maternal mortality in California. There will never be a situation where women of means will not have the option to go to a state or country where a safe procedure is available. H.3020 will only hurt poor women, those who are already in the most desperate of circumstances.

Section 44-41-630 subsection (7) makes reference to the states interest in the legitimate interests from the outset of the pregnancy in protecting the health of the mother, "however the bill clearly subordinates the health and safety of the mother to those of the fetus. The risk of death from childbirth is 14 times higher than that of abortion. A recent study in Annals of Internal Medicine found that physical health was no worse in those who sought and obtained abortion services than in those who sought an abortion and were turned away because of clinic restrictions. In fact, differences emerged showing worse health in the women who gave birth and 2 of the 163 women in the turned away group died in the postpartum period of the pregnancy they had sought to end. Seeking to protect the health of the mother is not a viable defense of H.3020.

Abortion is healthcare and healthcare decisions should be left to a woman and her physician. The World Health Organization, the Center for Disease Control, the American Medical Association, and the American College of Obstetrics and Gynecology (ACOG) oppose political efforts to prevent a women from getting the care that she needs to include bans on abortion care. "Lawmakers must support health policies based on sound science and evidence. Politicians must seek to improve access to care, not restrict it. Legislative restrictions fundamentally interfere with the patient—provider relationship and decrease access to necessary care for all women, and particularly for low-income women and those living long distances from health care

providers. Health care decisions should be made jointly only by patients and their trusted health care professionals, not by politicians."- ACOG- May 9, 2019

The United Nations Human Rights Committee asserts that access to abortion and prevention of maternal mortality are human rights. Please listen to those who are experts in delivery of the care to women and put aside partisan politics and sectarian religious views.