



WISCONSIN FAMILY ACTION
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**TESTIMONY ON ASSEMBLY BILL 262
ASSEMBLY COMMITTEE ON HEALTH
THURSDAY, OCTOBER 7, 2021
JULAIN K. APPLING, PRESIDENT**

Thank you, Chairman Sanfelippo and committee members, for holding this hearing on Assembly Bill 262. Wisconsin Family Action supports this bill.

In comparison to other states, Wisconsin requires very little in the way of specific data related to abortions. Earlier this month, Guttmacher Institute, a research organization that has long been identified as pro-abortion and is seen as being, in reality, the research arm of Planned Parenthood, updated its Abortion Reporting Requirements for all 50 states. Out of the 6 abortion reporting items that Guttmacher tracks, Wisconsin currently has only 3 of them: requiring reporting, complications, and meeting state requirement for parental involvement. The other 3 datapoints that Guttmacher believes are important are method of payment, patient's reason for abortion, and fetus viability.

Several years ago, the Charlotte Lozier Institute published a report on the subject of abortion reporting. *Abortion Reporting: Toward a Better National Standard*, found that basically the states pretty much report what is right in their own eyes. The report advocates for standardizing abortion data that gets collected and reported to the Centers for Disease Control, which is the national authority vested with collecting and disseminating the national data as derived from the data sent by the states. Not having the reporting standardized gives an incomplete picture of abortion nationally and therefore prohibits robust, helpful analysis.¹ While the report was published in 2015, an overview of the states and their reporting requirements shows that nothing substantive has changed in most states. Certainly, there has not been a federal law passed that requires standardized abortion reporting and in Wisconsin we have not changed our reporting law in the years following this report.

One of the states with excellent reporting requirements is Minnesota. The Lozier Institute recommends the Minnesota requirements and some added requirements as the standard. A comparison of the Minnesota required reporting, along with the additional Lozier recommendations and the items Assembly Bill 262 would require reveals that there is a great deal of overlap, which we view very positively.

In the years subsequent to this report, a number of states began adding that the abortion facility report how the induced abortion is paid for—by private health coverage, public assistance coverage or self-pay. This seems to us to be both a reasonable and helpful piece of information as we seek to get a better understanding of this life-taking procedure, that most assuredly is not health-care.

¹ <https://s27589.pcdn.co/wp-content/uploads/2016/08/Abortion-Reporting-Toward-a-Better-National-Standard-FINAL.pdf>

One important aspect of Assembly Bill 262 is that the name of the hospital, clinic or other facility where an abortion is performed must be reported. For too long, some of these facilities have been able to hide behind the anonymity our current law provides them. The public should know where abortions are taking place.

Regarding the sex of the baby and fetal anomalies, right now we have no way of knowing if baby girls, for instance, are being aborted in disproportionate numbers or if, for instance, babies diagnose with Down Syndrome, or another fetal anomaly are being disproportionately aborted. Collecting this information when a baby is aborted is critically important to ensure we are not wantonly discriminating against unborn children because of innate characteristics.

Understanding what impacts a woman's decision to have an abortion is critical, where the abortion is taking place (as in the facility), whether a fetal anomaly was present, and more adds considerably to the ability of both those who want fewer abortions and those who want to make them more widely accessible to make their case strategically.

Wisconsin is by no means the worst of the states when it comes to abortion reporting, but we can do much better. Assembly Bill 262 goes a long way in improving in this critical area. We support this bill and urge passage.

Thank you for your thoughtful and careful attention to our position on this bill.