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Colorado Senate
Attn: Senator Woodward
Re: SB20-077 Born Alive Child Physician Relationship

Thank you for your attention today. The Born Alive Child Physician Relationship bill is vitally important because children do survive abortions and the Born Alive Infants Protection Act signed into law by President Bush in 2002 was a definitions bill that provided no consequence for failing to provide medical care to survivors.

There's limited data on the incidence of children surviving abortions, because, in the words of Doctor Willard Cates, former head of the CDC's Abortion Surveillance group, as quoted in the Philadelphia Enquirer in 1981, "(Live births) are little known because organized medicine, from fear of public clamor and legal action, treats them more as an embarrassment to be hushed up than a problem to be solved. It's like turning yourself in to the IRS for an audit. ...The tendency is not to report because there are only negative incentives."

However, data from the CDC about the incidence of infants surviving abortion gives us an idea of the depth of the issue. As Arina Grossu testified before Congress, according to the CDC, "between the years 2003 and 2014 there were somewhere between 376 and 588 infant deaths under the medical code P96.4 which keeps track of babies born alive after a "termination of pregnancy."

The CDC concluded that of the 588 babies, 143 were "definitively" born alive after an attempted abortion and they lived from minutes to one or more days, with 48% of the babies living between one to four hours.

It's important to note that this is an underestimate, because these are just reported numbers from hospitals, not abortion facilities. The now notorious abortionist Dr. Kermit Gosnell, is only one abortionist who was responsible for "hundreds of snippings" of born-alive babies, yet he didn't report even one. His numbers alone exceed the "definitive" numbers of the CDC.

As if the number of children surviving abortions wasn't enough, as if the reality of the lack of consequence for failing to provide timely medical care to survivors or even killing them post-birth wasn't enough to convict me of the importance of this bill, my own life story most certainly does.

I'm an abortion survivor, myself. In August of 1977, my birthmother, as a 19-year-old college student, had a saline infusion abortion forced upon her against her will by her mother, my maternal grandmother.

The saline infusion abortion was the most common abortion procedure performed at the time, which involved injecting a toxic salt solution into the amniotic fluid surrounding me in the womb. The intent of that toxic salt solution was to poison and scald me to death. Typically, that procedure lasted about 72 hours—the child soaked in that toxic solution until their life was effectively ended by it, and then premature labor was induced, expelling the deceased child from the womb. My medical records indicate that I didn't soak in that saline solution for just three days, but actually five, while they tried numerous times to induce my birthmother's labor.

No matter what people believe about abortion in our society, most people agree that what happened to me was horrific. But I also hope that people recognize that what happened to my birth mother during those five days was also horrific. Abortion ends the life of its primary victim—most of the time, and dramatically impacts the life of the secondary victim—the woman.

Her labor was finally successfully induced on the fifth day, and I was delivered in the final step of that abortion procedure at St. Luke's Hospital in Sioux City, Iowa. However, instead of being delivered as a successful abortion—a deceased child, I was born alive.

My medical records actually state “a saline infusion for an abortion was done but was unsuccessful.” They also list out a complication of pregnancy as a “saline infusion.”

I weighed a little less than three pounds, which indicated to the medical professionals that my birth mother was much further along in her pregnancy than the 18-20 weeks pregnant that was estimated in medical records. In fact, a neonatologist remarked that he estimated me to be about 31 weeks gestational age.

Whether the abortionist simply estimated the gestation wrong based on my birthmother's self-reporting, or he was lying in order to proceed with the abortion, we'll probably never know. What we do know is that when I was delivered alive that day, there was argument about whether I would be provided medical care. My adoptive parents were told that I was “laid aside,” and that two nurses intervened to save my life. I've now had contact with a nurse who was working in the NICU that day and remembers a “tall, blonde nurse” rushing me in.

I am one of the lucky ones—to not only survive an abortion, but to have someone fight to save me. We know this is not always the case. Look up the testimony of nurse Jill Stanek, in case you haven't heard of her experience, although there are so many more stories like hers.

Despite the miracle of my survival, my prognosis was initially very guarded. I suffered from severe respiratory and liver problems, seizures...the doctors actually thought I had a fatal heart defect initially because of the amount of distress that my body was under. Yet here I am today, overall healthy, and a wife and mother, myself.

Timely medical care is of the utmost importance for a child like me who survives an abortion. I truly believe I'm alive today not only because I was miraculously saved from death in the

abortion, but also because life-saving medical care was right down the hallway for me, once someone decided they couldn't, in good conscience, leave me to die.

Abortion survivors fight for our lives in the womb. We shouldn't have to fight for our lives again once we're born. This is common sense legislation that shows respect for the dignity and value inherent within each and every one of us.

Accurate reporting of the incidence of children surviving is also important. Only eight states require the reporting of statistics on children who were born alive during abortion procedures, and of those, five states have reported those numbers out. Those are as follows:

Minnesota: 16 survivors between 2015-2018

Arizona: 10 survivors in 2017

Indiana: 27 survivors from 2008-2018

Florida: 23 survivors from 2013-2019

Michigan: 84 survivors from 1997-2018

How many survivors will it take for this legislation to be passed?

I'm blessed to be alive, and I've been united with my biological mother and many members of both her family and members of my biological father's family. I can say on behalf of my birthfamily, my adoptive family, my husband, Ryan, and daughters, Olivia and Ava, we are thankful for your support of this bill.

Passage of The Born Alive Child Physician Relationship bill will ensure that the fate of survivors like me here in Colorado and the over 300 survivors that I've connected with through my ministry, The Abortion Survivors Network, aren't left in the hands of their abortionist or the "luck of the draw" in what medical professional is working that day. The reality is, that late term abortions, like those that occur regularly in Colorado, result in the even greater likelihood of a child like me surviving an abortion. Colorado needs this legislation due to its incidence of late term abortions.

Thank you for supporting the bill,
Sincerely,

Melissa Ohden, MSW
Founder, The Abortion Survivors Network